

## **CONFIDENTIAL - FOR INTERNAL DISCUSSIONS ONLY**

April 25, 2006

Ms. Jeanne LaBrecque  
Director of Medicaid and Health Policy  
State of Indiana  
Office of Medicaid Policy and Planning  
402 W. Washington Street  
Indianapolis, IN 46204

### **RE: DATA BOOK SUMMARY**

Dear Jeanne:

Milliman, Inc. (Milliman) has been retained by the State of Indiana, Office of Medicaid Policy and Planning (OMPP) to develop data and information for the Data Book to be used by prospective contractors for the Package A/B and Package C Risk Based Managed Care (RBMC) programs. This letter presents the Data Book in its entirety and discusses the development of the capitation rates.

### **LIMITATIONS**

The information contained in this letter, including the Data Book, has been prepared for the State of Indiana, Office of Medicaid Policy and Planning and their consultants and advisors. It is our understanding that the information contained in this letter may be utilized in a public document. To the extent that the information contained in this letter is provided to third parties, the letter should be distributed in its entirety including all supporting documentation. A complete copy of the Data Book, including all its attachments and documentation is provided with this letter. Any user of the data must possess a certain level of expertise in actuarial science and healthcare modeling so as not to misinterpret the data presented.

Milliman makes no representations or warranties regarding the contents of this letter to third parties. Likewise, third parties are instructed that they are to place no reliance upon this letter prepared for OMPP by Milliman that would result in the creation of any duty or liability under any theory of law by Milliman or its employees to third parties. Other parties receiving this letter must rely upon their own experts in drawing conclusions about the OMPP's capitation rates, assumptions, and trends.



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The information contained in this letter was prepared as documentation of the capitation rates for Medicaid managed care organization health plans in the State of Indiana and to summarize the information contained in the 2007 Data Book. The information may not be appropriate for any other purpose.

### **DEVELOPMENT OF ACTUARIAL MODELS**

The Data Book documentation provides the detail and assumptions underlying the proposed capitation rates. Further topics discussed with OMPP while developing the Data Book are addressed in this letter.

### **DATA BOOK FORMAT**

#### ***Included Services***

The final list of services included in the Data Book experience was developed based on a review of the prior Data Book and discussions with OMPP. The included services reflect those services that will be covered under the calendar year 2007 capitation rate.

#### ***Service Detail***

The format of the Data Book was developed to maintain consistency with the prior Data Book release. Additional service lines have been added to the Inpatient Hospital and Physician categories to reflect the inclusion of behavioral health services in the capitation rate. A separate line has also been added for Clinic Visits.

### **MATERNITY SERVICES**

A separate cost model has been prepared to report the claims experience for services reimbursed by the supplemental maternity payment. The covered services are not an exhaustive list of maternity delivery services. Expenditures for services not included in the supplemental payment were reported in the rate cell monthly capitation models.

The maternity expenditures were summarized on a per delivery basis, the same basis as the payment. For low rate range, the number of deliveries was based on the number of inpatient hospital DRG codes incurred. For the high rate range, the number of deliveries was based on physician delivery services.

### **DATA RELIANCE**

In developing the values contained in this letter and the Enclosure, we have relied upon certain data and information from OMPP and their consultants. While limited review was performed for reasonableness, the data and information was accepted without audit. To the extent that the data



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and information was not accurate or complete, the values shown in this letter will need to be revised.



If you have any questions regarding the enclosed information, please do not hesitate to contact me at (317) 524-3512.

Sincerely,

Robert M. Damler, FSA, MAAA  
Principal and Consulting Actuary

RMD/sdm  
Enclosure

**STATE OF INDIANA  
OFFICE OF MEDICAID POLICY AND PLANNING  
DATA BOOK**

**RISK BASED MANAGED CARE FOR  
HOOSIER HEALTHWISE POPULATIONS**

*April 25, 2006*

*Prepared by:*

*Milliman, Inc*

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## **DATA BOOK**

### **RISK BASED MANAGED CARE FOR HOOSIER HEALTHWISE POPULATIONS**

#### **I. INTRODUCTION**

The Data Book has been prepared by Milliman, Inc. (Milliman) under the direction of the State of Indiana, Office of Medicaid Policy and Planning (OMPP) to provide historical data and information to the health plans for contract rates for the Hoosier Healthwise Package A/B populations and the Package C population. The prospective contractor will be accepting rates to be effective for the twelve months of calendar year 2007.

The Data Book consists of a series of actuarial models which develop the contract capitation rate range, beginning with annual PCCM claim experience and ending with a final capitation rate range, based on differing levels of healthcare management. Historical claims cost and utilization has been provided by category of service for each payment cell. The Data Book provides a series of actuarial models for each region, age/gender, and calendar year stratification. In addition, a set of actuarial models has been developed for maternity experience. Separate rate ranges have been created for recipients defined as MA-U (ineligible for TANF due to SSI payments).

Each set of actuarial models includes claim experience summarized from the EDS claims database. The claim cost from the EDS system represents dollars paid by the state and co-payments made by members, net of TPL and disallowed charges. The 2007 contracted capitation rates are based only on PCCM experience, with adjustments that reflect expected experience under a risk-based managed care plan.

The information contained in this Data Book was prepared to provide historical data and information to the health plans on the development of the contracted rates for the Package A/B populations and the Package C population. This information may not be appropriate for any other purpose. The data and information presented is dependent upon the EDS PCCM claims experience reported to OMPP. Any user of the data must possess a certain level of expertise in actuarial science and healthcare modeling, or be advised by someone with this background, so as not to misinterpret the data presented. OMPP and Milliman provide no guarantee, either written or implied, that the data and information is 100% accurate or error free.



## II. ACTUARIAL MODELS

The 2007 Data Book is composed of five separate actuarial models. The actuarial models are provided in the order used in the rate development process. The following paragraphs provide a description of each actuarial model, and the actuarial model's relation to other actuarial models in the Data Book. The following sections of this document provide more detail on the content of each actuarial model.

Attachments 1 through 5 contain the actuarial models.

- Attachment 1: Annual State Fiscal Year PCCM Experience
- Attachment 2: PCCM and Health Plans' Statewide Experience
- Attachment 3: Aid Category Group Projections
- Attachment 4: Capitation Rate Summary
- Attachment 5: 2007 vs. 2006 Capitation Rate Comparison
- Attachment 6: Services Included in the Maternity Case Rate

Attachment 1 provides in detail the experience for each state fiscal year for the PCCM population on an aid category group basis. Note, for all PCCM values illustrated in the Databook for newborns, the values represent both fee-for-service and PCCM enrollees. Separate worksheets have been created for the MA-U and Non-MA-U populations. For each year, utilization, average cost per service, and PMPM values are shown. The actual experience reflects no changes made to the claim experience received by Milliman. The trended and completed experience has been adjusted for claims completion, trended to July 1, 2005, and adjusted for morbidity differences between the base experience population and the expected 2007 health plan population.

Due to large portions of the state already being covered by risk-based managed care during the experience periods, it was necessary to estimate the relative morbidity of the base PCCM population compared to the expected calendar year 2007 health plan population. Milliman calculated these morbidity adjustments using fiscal year 2002 PCCM experience, diagnosis information, and the Chronic Illness & Disability Payment System (CDPS) risk scoring methodology. Further detail on the risk adjustment process is discussed in section VIII of the Data Book. The morbidity adjustments for each population and state fiscal year are shown at the bottom of the experience cost models shown in Attachment 1.

Attachment 2 provides a side-by-side comparison of PCCM experience versus health plan reported encounter data by providing utilization, cost per service, and PMPM rates. The same trends and completion adjustments used with the base PCCM experience were applied to the reported encounter data. Separate morbidity adjustments were determined for the reported encounter data to reflect the historical health plan population having lower morbidity than expected calendar year 2007 health plan population. A worksheet has been created for each aid category group. For the aid category groups with both Packages A/B and Package C experience, a comparison for both populations has been shown. The statewide rates for the PCCM population will be equal to the statewide rates shown in the Attachment 1 worksheets.

Attachment 3 shows the development of the health plan statewide adjusted rate from the PCCM statewide rate data. Two worksheets have been provided for each capitation rate cell to illustrate the development of the high and low capitation rate ranges based on differing degrees of managed care. The base utilization and cost per service rates in Attachment 3 are equal to the statewide PCCM rate found in Attachment 2. In Attachment 3, the base utilization and cost per service



rates are adjusted for managed care and trended forward to the calendar year 2007 contract period. The PMPM was calculated based on the adjusted utilization and cost per service. The resulting PMPM, after trend and managed care adjustments, establishes the statewide adjusted claim cost for the health plans in 2007.

Attachment 4 summarizes the capitation rates for each aid category group and region. The last column in the Attachment 3 worksheets equals the 'CY 2007 Adjusted Claim Cost' column in Attachment 4 for each capitation rate cell. The adjusted claim cost is modified to include the impact of high cost claimants, the 10% fee schedule increase for evaluation and management procedure codes, and third-party liability recoveries. For the Package A/B Adolescent rate cell, a small rate increase was given due to the extension of Medicaid eligibility for Foster children through age 21. For each aid group, a regional capitation rate is determined by applying an area factor to the modified base claim cost. The '2007 Proposed Cap Rate' column illustrates the actual capitation payments that will be made in calendar year 2007. For illustrative purposes, the 'Mental Health Carve In' column indicates the dollar amount included in the calendar year 2007 rates for mental health services being covered by the health plans. Previously, mental health services were carved out of the capitation rates. The calendar year 2007 capitation rate net of the mental health carve-in is provided, allowing a direct comparison to the calendar year 2006 capitation rates. Attachment 4 includes worksheets for both the high and low managed care capitation rate ranges.

Attachment 4 also illustrates the development of the maternity case rate range. The maternity case rate range was developed based on the number of Inpatient admission deliveries (low rate ranges) and physician service counts (high rate ranges). Managed care adjustments were not applied to the maternity case rate.

Attachment 5 compares the cost of the calendar year 2007 proposed capitation rate ranges with the cost of the 2006 capitation rate based on the projected 2007 enrollment distribution by aid category group and region for both Package A/B and Package C. For Package A/B, a composite rate for calendar year 2007 is calculated by blending the MA-U and Non-MA-U rates and enrollment. The comparison has been shown performed on a PMPM and total dollar basis. Separate comparisons are made with the calendar year 2007 capitation rates both including and excluding the mental health carve-in. The capitation rate comparisons were developed for both the high and low capitation rate range. Comparisons are made for the eight geographic regions and on a statewide basis. Additionally, a capitation rate comparison is shown for the calendar year 2006 geographic regions: North, Central, and South.

Attachment 6 provides the list of services included in the development of the maternity case rate. Other maternity-related services not listed in Attachment 6 were included in other capitation rate cells.





### III. COVERED POPULATION

The Data Book has been developed to illustrate historical experience from the PCCM and risk-based managed care (RBMC) populations. The historical experience was developed for the population eligible for Hoosier Healthwise managed care enrollment based on category of aid. The categories of aid shown in Table 1 were included in the Data Book.

**Table 1**

**STATE OF INDIANA  
OFFICE OF MEDICAID POLICY AND PLANNING  
Summary of Covered Aid Categories**

**Packages A/B**

Aid Category	Description
1	Children age<19 who meet TANF income standards
2	Children ages 6-19 under 100% FPL
3	Wards not IVE eligible under 18
4	Title IVE foster children under 18
9	Children age 1-18 up to 150% FPL(CHIP I)
C	Low Income Families
E	Extended eligibility for pregnant women
F	Transitional Medical Assistance
M	Pregnancy – Full Coverage
N	Pregnancy – Related Coverage
S	Ineligible for TANF due to sibling income
T	Children under age 18
U	Ineligible for TANF due to SSI payments
X	Newborn – infants born to Medicaid recipients
Y	Children age <1 under 150% FPL
Z	Children 1- 5 under 133% FPL

**Package C**

Aid Category	Description
10	Children age 1-18, 150% - 200% FPL (CHIP II)

Members eligible for benefits covered under certain waiver programs have been excluded from the population. The members were identified based on information provided by OMPP.

Claim experience and eligibility periods for members covered under a waiver program other than the 1915(b) program were excluded from the actuarial models. If a member was waiver eligible during a month, all claims and eligibility for the month were excluded from the actuarial models. Waiver recipients were identified by having received a waiver service during the month. Waiver services were identified as any claim with the Category of Service field beginning with '36'. The type of waiver service was determined by the recipient's level of care.



#### IV. BASE YEAR PCCM CLAIMS

Attachment 1 incorporates base year PCCM claims for Packages A/B for three state fiscal year periods for the experience incurred during the 12 months ending June 30, 2003, June 30, 2004, and June 30, 2005. Attachment 1 for both Packages A/B and Package C were developed from claims paid through January 31, 2006.

The claims data was provided by OMPP from the EDS claims database. Experience from the EDS claims database was stratified into FFS and PCCM enrollment based on the member's plan assignment number.

The reimbursement amounts captured on the PCCM actuarial models reflect the amount paid by OMPP, net of third party liability. The reimbursement amounts have not been adjusted for payments made outside the claims processing system. These amounts are discussed later in the documentation.

The Data Book represents historical experience for those services that are included in the RBMC capitation payment. Services that are not covered under the capitation payment have been excluded from the experience. The excluded services were identified by the state-assigned Category of Service field, as shown in Table 2.

**Table 2**

**STATE OF INDIANA  
OFFICE OF MEDICAID POLICY AND PLANNING  
Claims Excluded from the Data Book**

<b>COS Field Value</b>	<b>Description</b>
0210, 0211, 0223(also procedure code T2048)	Inpatient State Psychiatric Services
1410, 1415	Nursing Home Services
1510, 1520, 1530, 1590	ICF-MR Services
2610, 2620	<i>See below</i>
2710 - 2817	Dental Services
3410	School Corporation Services
3610, 3615, 3620, 3625, 3630, 3635, 3640, 3645, 3690	Waiver Services
200233550(Provider ID)	First Steps

For categories of service 2610 (Mental Health Rehabilitation) and 2620 (Other Mental Health Services), contracting MCOs will be responsible for all services except the procedure codes listed in Table 3. The calendar year 2007 capitation rates have been developed to exclude only the mental health procedure codes and modifiers provided in Table 3.



**Table 3**

**STATE OF INDIANA  
OFFICE OF MEDICAID POLICY AND PLANNING  
Mental Health Services Carved-Out from Calendar Year 2007 Capitation Rates**

New Level II Code	New Modifier(s)	Old Local Level III Code	Description
H0031	HW	X3040	Mental health assessment, by non-physician. One unit equals one quarter hour.
H0004	HW	X3042	Behavioral health counseling and therapy, per 15 minutes.
H0004	HW and HS or HR	X3044	Behavioral health counseling and therapy HR – Family/couple w/client HS – Family/couple w/o client
H0004	HW and HQ	X3045	Behavioral health counseling and therapy, per 15 minutes HQ – Group setting
H2011	HW	X3046	Crisis intervention. One unit of service equals 15 minutes.
H0033	HW	X3047	Oral medication administration, direct observation.
H2014	HW	X3048	Skills training and development. One unit equals 15 minutes.
H0035	HW	X3049	Mental health, partial hospitalization, treatment, less than 24 hours
T1016	HW	X3050	Case management, each 15 minutes.
97535	HW and HQ	W9082	Self care/home management training. Group setting.
97537	HW and HQ	W9082	Community/work reintegration training. Group setting.
T1016	HW and TG	Z5025	Case management. Complex/high tech level of care.

All services reimbursed through the maternity case-rate payment have been identified and presented in a separate actuarial model. The maternity case-rate payment services were identified by DRG or CPT-4 procedure code, depending on the claim type, as described in Attachment 6. Any maternity service not specifically listed was included in the Data Book as part of the non-maternity-experience.



## V. CATEGORIES OF SERVICE

The categories of service listed in Table 4 describe the actuarial model service groupings. The units associated with the categories have been indicated. Further, the primary method of classifying the claims has been provided.

**Table 4**

**STATE OF INDIANA  
OFFICE OF MEDICAID POLICY AND PLANNING  
Categories of Service**

Type of Service	Utilization Units	Classification Basis
<b><i>Inpatient Hospital</i></b>		
Medical/Surgical/Non-Delivery Maternity	Admits/Days	COS, DRG
Well Newborn	Admits/Days	COS, DRG
Behavioral Health	Admits/Days	COS, DRG
Other Inpatient	Admits/Days	COS, DRG
<b><i>Outpatient Hospital</i></b>		
Emergency Room	Services	Revenue Code
Other Outpatient	Services	Revenue Code
<b><i>Ancillaries</i></b>		
Prescription Drugs/OTC Drugs	Scripts	COS
Transportation	Runs	COS, Procedure Code
DME/Home Health/Other Ancillary	Units	COS, Procedure Code
<b><i>Physician</i></b>		
Inpatient and Outpatient Surgery	Procedures	Procedure Code
Office Visits/Consults	Visits	Procedure Code
Well Baby Exams/Physical Exams	Exams	Procedure Code
Hospital Inpatient Visits	Visits	Procedure Code
Emergency Room Visits	Visits	Procedure Code
Radiology/Pathology	Procedures	Procedure Code
Outpatient Behavioral Health	Procedures	Procedure Code
Clinic Visit	Visits	Procedure Code
Other Professional	Services	Procedure Code

Note: COS = State assigned category of service.



## VI. RATE CELLS

The Data Book includes a series of actuarial models for each rate cell. An actuarial model was developed for every combination of the rating characteristics listed in Table 5.

**Table 5**

**STATE OF INDIANA  
OFFICE OF MEDICAID POLICY AND PLANNING  
Data Book Age/Gender/Area Stratifications**

	Program		
	Package A/B Non-MA-U	Package A/B MA-U	Package C
Newborns	0 – 11 Months	0 – 11 Months	0 – 11 Months
Preschoolers	1 – 5 Years	1 – 5 Years	1 – 5 Years
Children	6 – 12 Years	6 – 12 Years	6 – 12 Years
Adolescents	13 – 20 Years	13 – 20 Years	13 – 18 Years
Adult – Males	21+ Years	21+ Years	Not Applicable
Adult – Females	21+ Years	21+ Years	Not Applicable
Delivery Payment	All Ages	All Ages	All Ages
Composite	All Ages/Gender	All Ages/Gender	All Ages/Gender



## **VII. ACTUARIAL MODEL DATA SUMMARY**

Attachment 1 illustrates annual utilization rates per 1,000, net allowed charges per service, and per member per month claims cost for the PCCM data set for each of three state fiscal year periods. The following provides a brief description of each of the data fields.

Note, for the maternity delivery data sets, the values shown are determined on a per delivery basis. The raw expenditure and utilization experience values were divided by the total number of hospital inpatient admissions associated with the qualifying Maternity Delivery DRG codes. The number of hospital inpatient admissions replaces the member months in the calculations described below.

### **a. Type of Service**

The type of service was defined by a combination of category of service, DRG, revenue code, and procedure code.

### **b. Annual Utilization Per 1,000**

This value represents the annual utilization rates per 1,000 by type of service. The unit value varies for each type of service. The unit value was defined in a prior section. The value was calculated by dividing the total units for each service category by the member months in the corresponding period and multiplying by 12 times 1,000.

### **c. Average Cost Per Service**

This value represents the net allowed amount per unit of service. The value was calculated net of third party liability recoveries. The value does not reflect an adjustment for third party liability recoveries after claim payment.

### **d. Member Months**

This value represents the number of enrollee months in each rate cell during the state fiscal year. A member's age was determined as of the first day of each month they were enrolled. Each enrollee was assumed to be eligible for the entire month. No partial months of eligibility were included, except in the case of mid-month RBMC or PCCM enrollment.

### **e. PMPM**

The per member per month value represents the net claim cost for each type of service. The value was calculated by multiplying the annual utilization per 1,000 times the net allowed charge and dividing by the product of 12 times 1,000.



## **VIII. ADJUSTMENTS TO PCCM DATA IN RATE DEVELOPMENT PROCESS**

As discussed in Section II of this document, several adjustments were made to the base PCCM data to determine the 2007 calendar year capitation rates. The following outlines each of the adjustments applied to the base PCCM data.

### **a. Completion Factors**

Milliman used 36 months of claims experience for the PCCM population that was incurred through June 2005 and paid through January 2006 (seven months of run-out). Milliman applied claim completion factors to the twelve months of fiscal year 2005 claims experience. The claim completion factors were developed by service category and aid group based on claims experience for the PCCM population incurred and paid through February 2006. Completion factors have been applied to the trended experience for state fiscal year 2005 shown in Attachment 1.

### **b. Trends/Inflation**

In the development of the actuarially sound capitation rates, Milliman developed trend rates for two purposes. First, it was necessary to trend historical PCCM experience from state fiscal year 2003, 2004, and 2005 forward to a common center point. Second, the blended rates from the three years of PCCM experience had to be trended forward from the common center point to the projection midpoint, July 1, 2007.

For the historical trend rates, Milliman utilized historical PCCM experience and performed linear regression on the data to develop trend rates by population and category of service for both utilization and PMPM. The 2003, 2004, and 2005 state fiscal year historical PCCM experience was trended forward to July 1, 2005, the common center point. Table 6 displays annual utilization trend rates by aid category and category of service. Table 7 provides the annual PMPM trend rates by aid category and category of service. Table 8 shows utilization and cost per delivery maternity trend rates.



Table 6

**STATE OF INDIANA  
OFFICE OF MEDICAID POLICY AND PLANNING  
Annual Historical Utilization Trend Rates**

Category of Service	Category of Assistance		
	Package A/B Adult	Package A/B Children	Package C
<b><i>Inpatient Hospital</i></b>			
Medical\Surgical	(4.0%)	3.5%	6.0%
Well Newborn	0.0%	3.5%	2.0%
Behavioral Health	5.0%	4.0%	4.0%
Other Inpatient	(4.0%)	3.5%	6.0%
<b><i>Other Outpatient</i></b>			
Emergency Room	3.5%	7.0%	10.0%
Other Outpatient	3.5%	7.0%	10.0%
<b><i>Pharmacy</i></b>			
Prescription Drugs	1.0%	6.0%	5.0%
<b><i>Ancillaries</i></b>			
Transportation	3.5%	3.5%	(1.0%)
DME, HH, Other	8.0%	6.0%	6.0%
<b><i>Physician</i></b>			
Surgery	1.0%	4.0%	1.5%
Office Visits\Consults	1.0%	4.0%	1.5%
Well Baby Exams	1.0%	4.0%	1.5%
Hospital IP Visits	1.0%	4.0%	1.5%
ER Visits	1.0%	4.0%	1.5%
Clinic Visit\Services	0.0%	(7.0%)	(3.0%)
Radiology/Pathology	9.5%	7.0%	9.0%
Behavioral Health	5.0%	4.0%	6.0%
Self-Referral	3.0%	3.0%	3.0%
Other Professional	3.0%	3.0%	3.0%





**Table 7**

**STATE OF INDIANA  
OFFICE OF MEDICAID POLICY AND PLANNING  
Annual Historical PMPM Trend Rates**

Category of Service	Category of Assistance		
	Package A/B Adult	Package A/B Children	Package C
<b><i>Inpatient Hospital</i></b>			
Medical\Surgical	(2.5%)	3.6%	(2.0%)
Well Newborn	0.0%	3.6%	2.0%
Behavioral Health	3.0%	3.0%	3.0%
Other Inpatient	(2.5%)	3.6%	(2.0%)
<b><i>Other Outpatient</i></b>			
Emergency Room	4.5%	6.6%	11.0%
Other Outpatient	4.5%	6.6%	11.0%
<b><i>Pharmacy</i></b>			
Prescription Drugs	4.0%	13.0%	17.5%
<b><i>Ancillaries</i></b>			
Transportation	12.0%	3.0%	(1.0%)
DME, HH, Other	10.0%	8.0%	8.0%
<b><i>Physician</i></b>			
Surgery	1.0%	5.6%	5.5%
Office Visits\Consults	1.0%	5.6%	5.5%
Well Baby Exams	1.0%	5.6%	5.5%
Hospital IP Visits	1.0%	5.6%	5.5%
ER Visits	1.0%	5.6%	5.5%
Clinic Visit\Services	5.0%	5.0%	5.0%
Radiology\Pathology	12.0%	4.5%	11.0%
Behavioral Health	3.0%	3.0%	6.0%
Self-Referral	3.0%	3.0%	3.0%
Other Professional	3.0%	3.0%	3.0%

**Table 8**

**STATE OF INDIANA  
OFFICE OF MEDICAID POLICY AND PLANNING  
Annual Historical Maternity Trend Rates**

Category of Service	Utilization	Per Delivery
<b><i>Inpatient Hospital</i></b>		
Delivery	0.0%	3.5%
<b><i>Physician</i></b>		
Delivery	0.0%	3.0%
Non-Delivery	0.0%	3.0%



The trend rates used to move the base experience forward to the projected period midpoint were developed from the 2005 OMPP Budget trend rates for the PCCM population and recent historical trends developed from the PCCM population. Table 9 illustrates the projected trend rates by aid category and category of service. The trend rates shown in Table 9 were applied to the July 1, 2005 PMPM cost.

**Table 9**

**STATE OF INDIANA  
OFFICE OF MEDICAID POLICY AND PLANNING  
2007 PMPM Trend Rates**

Category of Service	Category of Assistance			
	Package A/B - Adults	Package A/B - Children	Package C	Maternity
<i><b>Hospital</b></i>				
Inpatient	(1.0%)	3.6%	(1.0%)	3.0%
Inpatient Psych	4.0%	4.0%	4.0%	
Outpatient	5.0%	6.0%	10.0%	0.0%
Prescription Drugs	4.0%	12.0%	13.5%	N/A
DME/HH/Other	10.0%	6.0%	8.0%	
Transportation	12.0%	3.0%	3.0%	
Physician	5.0%	6.0%	5.5%	2.5%
Behavioral Health OP	4.0%	4.0%	4.0%	
Other Professional	4.0%	4.0%	4.0%	
Clinic Services	5.0%	5.0%	5.0%	N/A
Radiology/Pathology	10.0%	5.0%	10.0%	N/A

**c. Managed Care Adjustments**

Milliman adjusted the PCCM fee-for-service utilization and reimbursement rates per service to reflect the managed care environment. After reviewing reported encounter experience, utilization benchmarks in the *Guidelines*, and other sources, Milliman calculated percentage reductions to reflect the utilization differential between a moderately well managed population and a fee-for-service population. The percentage reductions were applied to the PCCM fee-for-service experience. In the development of the capitation rate range, Milliman assumed a more loosely managed population for the low degree of healthcare management capitation rates.

In addition to adjusting utilization rates to reflect healthcare management, Milliman adjusted the average reimbursement rates to reflect changes in the mix / intensity of services due to the management of health care. The reimbursement rate changes were also developed from data and information contained in the *Guidelines*.

Utilization and average reimbursement adjustments were developed for each age, gender, and aid category. The adjustments reflect a target of 50% to 75% degree of healthcare management for the capitation rates with a high degree of healthcare management. The capitation rates with a low



degree of healthcare management assume management levels between 10% and 25%. The adjustments for both utilization and average reimbursement are shown in the projection worksheets for each aid category. For both the high and low degree of healthcare management rates for the MA-U population, Milliman assumed healthcare management levels would be reduced by one half compared to the respective non-MA-U population. Milliman did not assume any managed care savings for the maternity delivery case rate.

For the Newborn population in both Package A/B and Package C, Milliman adjusted the base experience to reflect an older population being covered by the health plans versus the FFS/PCCM base experience environment. A large portion of the claim cost included in the newborn rate occurs within the first few days of a recipient's life. Despite the implementation of statewide mandatory risk-based managed care, a portion of Newborns will be born in an FFS environment and subsequently enroll in a health plan following hospital discharge.

#### **d. Large Claims**

Milliman made adjustments for individuals with large claims. Milliman excluded recipients with more than \$50,000 of medical expenditures in a given fiscal year from the base experience included in the capitation rates. The experience from the high-cost recipients was summarized to calculate the impact their claim experience would have on the base experience PMPM during each of the three fiscal years. Milliman averaged the impact of the large claims during the three fiscal years. Based on the average large claim impact, Milliman developed a managed care-adjusted expected PMPM estimate from the *Guidelines* to reflect claims costs for individuals who incur more than \$50,000 in a year.

#### **e. Copayments**

The PCCM fee-for-service experience was calculated to include member co-payments. The PCCM claims experience shown in Attachment 1 includes member co-payments. No further adjustments have been made to the capitation rates to reflect co-payments.

#### **f. Third-Party Liability**

The fee-for-service experience was calculated using the net paid claim data from the fee-for-service data base. The paid amounts reflect a reduction for the amounts paid by third party carriers. Additionally, Milliman reduced the fee-for-service experience by 1.7% for Package A/B services to reflect third party liability recoveries following payment of claims in Attachment 4. The 1.7% reduction represents the average third party liability recovery rate received by the state under the "pay-and-chase" recovery program. Third party liability may also be collected by the contractor.

#### **g. Region Factors**

Region factors for the non-MA-U population were developed for the eight regions by calculating composite risk scores for each region using fiscal year 2002 experience, individual county CDPS risk scores, and expected health plan enrollment in calendar year 2007. Region factors were calculated separately for Newborns, Non-Newborn children categories, and Adults. Due to the



limited number of Package C Newborns, Milliman did not apply area factors to this rate cell. For the other Package C aid group categories, Milliman used the Package A/B individual county risk scores and expected calendar year 2007 Package C enrollment to calculate area factors for the eight regions. The region factors were applied in Attachment 4.

Region factors were not applied to the MA-U capitation rates. Due to low enrollment levels and high claim cost variability, Milliman believed regional capitation rates for the MA-U population would be inappropriate.

#### **h. Statewide Risk-Based Managed Care**

OMPP finished implementation of statewide mandatory risk-based managed care in November 2005. Since a large portion of the population was already enrolled in risk-based managed care during the base experience period, it was necessary to determine if the underlying population in the PCCM experience had a higher or lower average morbidity than the population expected to be covered by the health plans in calendar year 2007.

Milliman used fiscal year 2002 PCCM Package A/B claims experience to assess morbidity differences between the population in the base experience and the expected population enrolled in managed care during calendar year 2007. The fiscal year 2002 PCCM experience was used due to the time period being in advance of the implementation of mandatory risk-based managed care.

The fiscal year 2002 experience was developed excluding any recipient with more than \$50,000 in incurred claims during the 12 month period and did not include MA-U recipients. The claims experience included all services covered by the calendar year 2007 capitation rates. Using diagnosis information associated with hospital and physicians claims incurred during fiscal year 2002, Milliman used the Chronic Illness and Disability Payment System (CDPS) to determine the relative morbidity in each county and population during state fiscal year 2002. Risk scores by county were developed for newborns, all other children, and adults. The risk scores by county were modified to minimize random fluctuations in counties with low enrollment levels. A credibility level was assigned to each individual counties with low enrollment levels. A credibility level was assigned to each individual county's risk scores based on fiscal year 2002 member months within the county and population.

Using expected calendar year 2007 Package A/B health plan enrollment, the risk scores by county were rescaled and normalized to a 1.0 composite for the three risk score populations. The relative morbidity of the base experience was developed by weighting the PCCM enrollment in each experience fiscal year against the individual county's risk scores. If the composite risk score for the experience fiscal year enrollment was greater than 1.0, it indicated the base experience had a higher morbidity than the expected 2007 health plan population. In order to reflect similar morbidity levels as the 2007 health plan population, Milliman adjusted the base PCCM experience by each experience year's morbidity relative to calendar year 2007.

Package C population morbidity adjustments were developed from the Package A/B individual county risk scores and expected calendar year 2007 Package C health plan enrollment. A 1.0 adjustment was applied to the Package C Newborn population due to low enrollment levels. A single adjustment was applied to the remaining three Package C populations.

Milliman did not make any adjustments to the Maternity Case Rate experience for morbidity changes due to the implementation of statewide mandatory risk-based managed care.



Attachment 1 illustrates the morbidity adjustments applied to the base experience by population and state fiscal year. A morbidity factor greater than 1.0 indicates the base period's experience was higher than the population expected to enroll in risk-based managed care in calendar year 2007.

**i. Administrative Allowance**

In the development of the actuarially sound capitation rates, Milliman has included an administrative cost allowance of 14.5% for the non-maternity capitation rates and 5.0% for the delivery case rate. The administrative cost allowance was calculated as a percentage of the capitation rate. Therefore, the capitation rate was determined by dividing the projected managed care claim cost by one minus the administrative cost allowance (*e.g.*, 1 minus 14.5%). By determining the capitation rate in this manner, the administrative allowance may be expressed as a percentage of the capitation rate. On a composite basis, the administrative cost allowance is approximately 13.8%. The composite would vary for each health plan based on the number of members and deliveries. In the establishment of the administrative cost allowance, we have utilized a value that is representative of Medicaid managed care organizations. Milliman reviewed data reported by the Indiana Medicaid managed care organizations for calendar years 2003 through 2005. Based on this review and additional administrative requirements required by OMPP in calendar year 2007, Milliman included the administrative cost allowances as outlined in Table 10. The inclusion of the administrative cost allowances is shown in Attachment 4.

**Table 10**

**STATE OF INDIANA  
OFFICE OF MEDICAID POLICY AND PLANNING  
Administrative Cost Allowance**

Percent of Capitation		
Item	Non-Maternity	Maternity
Administration	12.0%	3.0%
Profit/Contingency	1.0%	0.5%
Surplus Contribution	1.5%	0.5%
Total	14.5%	5.0%



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## **ATTACHMENT 1**

State of Indiana  
Office of Medicaid Policy & Planning  
Calendar Year 2007 Capitation Rates  
Base PCCM Claims Experience

4/25/2006  
8:12 AM

Population: Newborns Non-MAU  
Package: AB

Category of Service	State Fiscal Year 2003 Claims Experience						State Fiscal Year 2004 Claims Experience						State Fiscal Year 2005 Claims Experience					
	Actual			Trended & Completed			Actual			Trended & Completed			Actual			Trended & Completed		
	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM
<b>Inpatient Hospital</b>																		
Medical/Surgical	1,686.7	\$734.97	\$103.30	1,767.5	\$736.74	\$108.52	1,856.1	\$694.29	\$107.39	1,870.3	\$695.30	\$108.37	2,024.1	\$654.24	\$110.35	2,004.3	\$654.56	109.33
Well Newborn	1,783.0	387.46	57.57	1,868.5	388.39	60.48	1,844.7	388.97	59.79	1,858.9	389.53	60.34	1,998.6	372.24	62.00	1,979.1	372.42	61.42
Behavioral Health	-	0.00	0.00	-	0.00	0.00	0.2	881.27	0.02	0.2	868.59	0.02	-	0.00	0.00	-	0.00	0.00
Other Inpatient	87.1	215.85	1.57	91.3	216.37	1.65	6.4	588.85	0.31	6.4	589.71	0.32	7.4	842.90	0.52	7.3	843.31	0.51
<b>Outpatient Hospital</b>																		
Emergency Room	1,079.5	\$75.52	\$6.79	1,229.3	\$74.81	\$7.66	1,145.8	\$75.56	\$7.22	1,213.7	\$75.14	\$7.60	1,079.6	\$74.54	\$6.71	1,073.2	\$74.40	6.65
Other Outpatient	4,766.4	33.20	13.19	5,428.0	32.89	14.88	4,904.7	35.05	14.32	5,195.2	34.85	15.09	5,037.0	32.21	13.52	5,007.0	32.14	13.41
<b>Pharmacy</b>																		
Prescription/OTC Drugs	6,326.1	\$28.60	\$15.08	7,037.1	\$33.56	\$19.68	7,025.0	\$32.78	\$19.19	7,337.0	\$36.08	\$22.06	5,989.5	\$37.26	\$18.60	5,910.4	\$38.47	18.95
<b>Ancillaries</b>																		
Transportation	4,085.5	\$5.09	\$1.73	4,281.4	\$5.03	\$1.79	4,489.9	\$6.16	\$2.30	4,524.4	\$6.11	\$2.30	4,286.8	\$6.49	\$2.32	4,235.2	\$6.48	2.29
Ancillary	5,475.1	19.13	8.73	6,090.4	20.05	10.18	10,692.9	11.63	10.36	11,167.8	11.96	11.13	7,744.6	13.13	8.48	7,677.8	13.26	8.48
<b>Physician</b>																		
Surgery	1,508.0	\$45.96	\$5.78	1,599.4	\$47.75	\$6.36	1,148.9	\$56.93	\$5.45	1,166.2	\$58.25	\$5.66	850.9	\$76.93	\$5.46	841.7	\$77.52	5.44
Office Visits/Consults	5,113.3	26.42	11.26	5,423.5	27.45	12.41	5,301.4	25.49	11.26	5,380.9	26.08	11.70	5,076.9	25.66	10.85	5,022.0	25.85	10.82
Well Baby/Physical Exams	3,449.4	34.98	10.06	3,658.6	36.34	11.08	3,601.9	31.51	9.46	3,655.9	32.25	9.82	3,632.3	31.58	9.56	3,593.0	31.83	9.53
Hospital Inpatient Visits	4,124.5	60.46	20.78	4,374.7	62.82	22.90	3,802.3	59.95	19.00	3,859.3	61.34	19.73	3,900.5	62.93	20.46	3,858.4	63.41	20.39
Emergency Room Visits	1,105.3	42.01	3.87	1,172.4	43.64	4.26	1,167.7	43.45	4.23	1,185.2	44.45	4.39	1,071.9	43.85	3.92	1,060.3	44.18	3.90
Radiology/Pathology	2,126.7	12.30	2.18	2,421.9	11.59	2.34	2,039.3	12.76	2.17	2,160.1	12.31	2.22	1,846.0	13.38	2.06	1,843.8	13.23	2.03
Outpatient Behavioral Health	9.6	70.49	0.06	10.2	68.81	0.06	7.8	59.80	0.04	7.9	58.94	0.04	4.8	66.48	0.03	4.7	66.16	0.03
Clinic Visit	1,556.2	47.91	6.21	1,248.1	64.90	6.75	1,450.2	87.21	10.54	1,244.7	104.62	10.85	1,175.4	87.56	8.58	1,099.5	93.04	8.52
Other Professional	9,021.5	17.27	12.99	9,340.3	17.27	13.44	10,757.4	15.82	14.18	10,761.6	15.82	14.19	8,998.4	20.17	15.12	8,858.3	20.17	14.89
<b>Total PMPM</b>			\$281.14			\$304.44			\$297.23			\$305.82			\$298.52			\$296.59
<b>Member Months</b>			289,729			289,729			282,784			282,784			226,552			226,552
<b>Morbidity Adjustment</b>						1.040						1.045						1.043

State of Indiana  
Office of Medicaid Policy & Planning  
Calendar Year 2007 Capitation Rates  
Base PCCM Claims Experience

4/25/2006  
8:12 AM

Population: Preschoolers Non-MAU  
Package: AB

Category of Service	State Fiscal Year 2003 Claims Experience						State Fiscal Year 2004 Claims Experience						State Fiscal Year 2005 Claims Experience					
	Actual			Trended & Completed			Actual			Trended & Completed			Actual			Trended & Completed		
	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM
<b><i>Inpatient Hospital</i></b>																		
Medical/Surgical	92.0	\$1,021.25	\$7.83	93.3	\$1,023.71	7.96	92.9	\$943.40	\$7.30	90.5	\$944.77	7.12	73.3	\$993.16	\$6.07	70.3	\$993.64	5.82
Well Newborn	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00
Behavioral Health	10.5	469.85	0.41	10.8	458.63	0.41	17.1	466.01	0.67	16.8	459.30	0.64	18.1	469.94	0.71	17.1	467.68	0.67
Other Inpatient	-	0.00	0.00	-	0.00	0.00	3.1	849.02	0.22	3.0	850.25	0.22	4.2	794.01	0.28	4.1	794.39	0.27
<b><i>Outpatient Hospital</i></b>																		
Emergency Room	777.7	\$77.19	\$5.00	856.7	\$76.47	5.46	861.4	\$76.60	\$5.50	882.4	\$76.17	5.60	826.6	\$74.65	\$5.14	795.8	\$74.51	4.94
Other Outpatient	2,605.4	46.08	10.00	2,870.3	45.65	10.92	2,914.4	45.44	11.04	2,985.5	45.19	11.24	3,012.2	41.82	10.50	2,900.0	41.74	10.09
<b><i>Pharmacy</i></b>																		
Prescription/OTC Drugs	5,796.4	\$31.88	\$15.40	6,237.6	\$37.41	19.45	6,667.4	\$34.20	\$19.00	6,734.5	\$37.64	21.12	6,113.2	\$37.64	\$19.18	5,842.6	\$38.87	18.92
<b><i>Ancillaries</i></b>																		
Transportation	3,853.0	\$3.13	\$1.01	3,906.1	\$3.09	1.01	3,875.5	\$3.13	\$1.01	3,776.8	\$3.11	0.98	4,208.2	\$3.48	\$1.22	4,026.7	\$3.47	1.17
Ancillary	4,843.3	5.94	2.40	5,212.0	6.22	2.70	5,861.7	5.07	2.48	5,920.7	5.21	2.57	7,243.0	4.33	2.61	6,954.5	4.37	2.53
<b><i>Physician</i></b>																		
Surgery	1,093.9	\$33.51	\$3.05	1,122.4	\$34.81	3.26	616.2	\$51.44	\$2.64	604.9	\$52.63	2.65	339.3	\$81.23	\$2.30	325.1	\$81.85	2.22
Office Visits/Consults	3,392.6	25.88	7.32	3,481.0	26.89	7.80	3,642.6	24.66	7.49	3,575.6	25.24	7.52	3,553.1	25.14	7.44	3,404.0	25.33	7.19
Well Baby/Physical Exams	787.9	34.43	2.26	808.5	35.77	2.41	817.9	31.69	2.16	802.8	32.43	2.17	832.0	31.56	2.19	797.1	31.80	2.11
Hospital Inpatient Visits	174.1	54.92	0.80	178.7	57.05	0.85	192.0	55.41	0.89	188.5	56.69	0.89	163.7	56.92	0.78	156.9	57.36	0.75
Emergency Room Visits	761.5	38.99	2.47	781.3	40.51	2.64	834.6	40.36	2.81	819.2	41.30	2.82	782.4	41.09	2.68	749.6	41.40	2.59
Radiology/Pathology	1,470.0	11.76	1.44	1,619.5	11.09	1.50	1,416.8	12.11	1.43	1,451.4	11.68	1.41	1,308.7	12.66	1.38	1,266.0	12.51	1.32
Outpatient Behavioral Health	291.7	50.65	1.23	299.3	49.44	1.23	290.3	50.34	1.22	284.9	49.61	1.18	286.4	50.90	1.21	271.8	50.65	1.15
Clinic Visit	526.1	42.44	1.86	408.2	57.48	1.96	543.8	74.22	3.36	451.4	89.04	3.35	493.6	67.34	2.77	447.2	71.56	2.67
Other Professional	3,362.2	13.24	3.71	3,367.6	13.24	3.72	5,341.7	10.23	4.55	5,168.0	10.23	4.41	4,634.1	13.67	5.28	4,418.4	13.67	5.03
<b>Total PMPM</b>			\$66.20			\$73.26			\$73.76			\$75.90			\$71.74			\$69.43
<b>Member Months</b>			738,155			738,155			699,553			699,553			508,515			508,515
<b>Morbidity Adjustment</b>						1.075						1.080						1.077



State of Indiana  
Office of Medicaid Policy & Planning  
Calendar Year 2007 Capitation Rates  
Base PCCM Claims Experience

4/25/2006  
8:12 AM

Population: Children Non-MAU  
Package: AB

Category of Service	State Fiscal Year 2003 Claims Experience						State Fiscal Year 2004 Claims Experience						State Fiscal Year 2005 Claims Experience					
	Actual			Trended & Completed			Actual			Trended & Completed			Actual			Trended & Completed		
	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM
<b><i>Inpatient Hospital</i></b>																		
Medical/Surgical	42.1	\$1,107.91	\$3.88	42.7	\$1,110.59	3.95	40.1	\$1,022.78	\$3.42	39.1	\$1,024.26	3.34	37.7	\$1,132.70	\$3.56	36.2	\$1,133.25	3.42
Well Newborn	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00
Behavioral Health	111.3	467.15	4.33	114.2	456.00	4.34	126.7	460.03	4.86	124.4	453.41	4.70	154.3	459.36	5.91	146.4	457.14	5.58
Other Inpatient	-	0.00	0.00	-	0.00	0.00	1.3	1,369.32	0.14	1.2	1,371.31	0.14	1.7	1,013.66	0.14	1.6	1,014.15	0.14
<b><i>Outpatient Hospital</i></b>																		
Emergency Room	442.0	\$78.17	\$2.88	487.0	\$77.44	3.14	457.6	\$77.62	\$2.96	468.8	\$77.18	3.02	448.5	\$75.77	\$2.83	431.8	\$75.62	2.72
Other Outpatient	1,846.2	44.03	6.77	2,033.9	43.62	7.39	2,024.4	43.10	7.27	2,073.8	42.86	7.41	2,167.9	39.90	7.21	2,087.2	39.82	6.93
<b><i>Pharmacy</i></b>																		
Prescription/OTC Drugs	6,414.0	\$49.70	\$26.56	6,902.2	\$58.31	33.54	7,346.7	\$55.23	\$33.82	7,420.7	\$60.79	37.59	7,267.2	\$59.53	\$36.05	6,945.4	\$61.47	35.58
<b><i>Ancillaries</i></b>																		
Transportation	6,107.6	\$2.26	\$1.15	6,191.8	\$2.24	1.15	5,901.6	\$2.45	\$1.21	5,751.4	\$2.44	1.17	5,162.3	\$2.63	\$1.13	4,939.7	\$2.62	1.08
Ancillary	4,235.8	3.86	1.36	4,558.3	4.04	1.54	7,162.7	2.67	1.59	7,234.8	2.75	1.66	7,479.6	3.00	1.87	7,181.6	3.03	1.81
<b><i>Physician</i></b>																		
Surgery	740.2	\$37.84	\$2.33	759.5	\$39.32	2.49	440.1	\$54.64	\$2.00	432.0	\$55.91	2.01	280.3	\$78.30	\$1.83	268.6	\$78.90	1.77
Office Visits/Consults	2,377.4	26.52	5.25	2,439.4	27.55	5.60	2,513.9	25.12	5.26	2,467.7	25.70	5.29	2,597.2	25.23	5.46	2,488.2	25.42	5.27
Well Baby/Physical Exams	225.1	33.74	0.63	231.0	35.05	0.67	237.9	31.39	0.62	233.6	32.11	0.63	236.7	31.21	0.62	226.8	31.45	0.59
Hospital Inpatient Visits	166.9	47.52	0.66	171.2	49.37	0.70	197.1	41.39	0.68	193.5	42.35	0.68	210.2	45.30	0.79	201.4	45.64	0.77
Emergency Room Visits	418.3	39.05	1.36	429.3	40.56	1.45	426.8	40.36	1.44	419.0	41.29	1.44	410.6	41.37	1.42	393.4	41.69	1.37
Radiology/Pathology	1,304.8	13.43	1.46	1,437.4	12.66	1.52	1,282.3	14.04	1.50	1,313.6	13.55	1.48	1,319.6	13.55	1.49	1,276.5	13.39	1.42
Outpatient Behavioral Health	1,476.2	45.61	5.61	1,514.7	44.52	5.62	1,581.3	45.57	6.00	1,552.2	44.91	5.81	2,887.6	24.24	5.83	2,740.1	24.12	5.51
Clinic Visit	232.2	60.59	1.17	180.2	82.07	1.23	328.8	70.22	1.92	272.9	84.24	1.92	372.2	71.66	2.22	337.2	76.14	2.14
Other Professional	3,815.5	16.74	5.32	3,821.6	16.74	5.33	4,845.0	15.33	6.19	4,687.4	15.33	5.99	4,961.8	16.42	6.79	4,730.7	16.42	6.47
<b>Total PMPM</b>			\$70.76			\$79.67			\$80.90			\$84.27			\$85.16			\$82.56
<b>Member Months</b>			813,368			813,368			774,445			774,445			567,468			567,468
<b>Morbidity Adjustment</b>						1.075						1.080						1.077

State of Indiana  
Office of Medicaid Policy & Planning  
Calendar Year 2007 Capitation Rates  
Base PCCM Claims Experience

4/25/2006  
8:12 AM

Population: Adolescents Non-MAU  
Package: AB

Category of Service	State Fiscal Year 2003 Claims Experience						State Fiscal Year 2004 Claims Experience						State Fiscal Year 2005 Claims Experience					
	Actual			Trended & Completed			Actual			Trended & Completed			Actual			Trended & Completed		
	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM
<b>Inpatient Hospital</b>																		
Medical/Surgical	93.9	\$1,077.38	\$8.43	95.2	\$1,079.98	8.57	95.6	\$969.83	\$7.73	93.2	\$971.23	7.54	88.0	\$1,032.26	\$7.57	84.4	\$1,032.76	7.26
Well Newborn	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00
Behavioral Health	192.9	455.81	7.33	197.9	444.93	7.34	209.0	451.33	7.86	205.2	444.84	7.61	214.4	442.27	7.90	203.3	440.14	7.46
Other Inpatient	0.1	1,266.32	0.01	0.1	1,269.38	0.01	1.4	949.87	0.11	1.3	951.24	0.10	1.4	877.35	0.10	1.4	877.78	0.10
<b>Outpatient Hospital</b>																		
Emergency Room	716.4	\$76.97	\$4.60	789.2	\$76.25	5.02	751.3	\$76.47	\$4.79	769.6	\$76.04	4.88	747.1	\$74.41	\$4.63	719.2	\$74.27	4.45
Other Outpatient	5,121.2	35.51	15.16	5,641.9	35.18	16.54	5,549.1	34.80	16.09	5,684.5	34.61	16.39	5,713.5	33.33	15.87	5,500.7	33.27	15.25
<b>Pharmacy</b>																		
Prescription/OTC Drugs	8,575.5	\$44.80	\$32.01	9,228.2	\$52.56	40.42	9,792.2	\$47.26	\$38.56	9,890.7	\$52.02	42.87	9,309.0	\$50.03	\$38.81	8,896.9	\$51.65	38.30
<b>Ancillaries</b>																		
Transportation	7,331.2	\$2.89	\$1.76	7,432.2	\$2.85	1.77	6,470.3	\$3.45	\$1.86	6,305.6	\$3.43	1.80	6,530.1	\$3.55	\$1.93	6,248.4	\$3.54	1.84
Ancillary	4,306.9	5.06	1.82	4,634.7	5.43	2.10	5,922.5	3.72	1.84	5,982.1	3.88	1.93	6,623.3	3.92	2.16	6,359.4	3.97	2.10
<b>Physician</b>																		
Surgery	2,048.1	\$27.80	\$4.75	2,101.5	\$28.88	5.06	876.0	\$49.61	\$3.62	859.9	\$50.76	3.64	411.1	\$103.30	\$3.54	393.8	\$104.09	3.42
Office Visits/Consults	2,703.4	27.85	6.27	2,773.9	28.94	6.69	2,965.1	25.77	6.37	2,910.5	26.37	6.40	3,012.3	26.05	6.54	2,886.0	26.25	6.31
Well Baby/Physical Exams	202.2	31.22	0.53	207.4	32.43	0.56	224.1	28.93	0.54	219.9	29.60	0.54	229.7	28.50	0.55	220.0	28.72	0.53
Hospital Inpatient Visits	415.2	49.94	1.73	426.0	51.88	1.84	440.0	45.91	1.68	431.9	46.97	1.69	475.1	43.78	1.73	455.2	44.11	1.67
Emergency Room Visits	703.4	44.20	2.59	721.7	45.92	2.76	726.6	45.18	2.74	713.3	46.23	2.75	698.7	46.30	2.70	669.4	46.65	2.60
Radiology/Pathology	3,493.4	16.61	4.84	3,848.6	15.66	5.02	3,757.0	16.94	5.31	3,848.6	16.35	5.25	3,703.0	17.78	5.49	3,582.1	17.57	5.24
Outpatient Behavioral Health	1,424.8	43.98	5.22	1,461.9	42.93	5.23	1,475.6	43.77	5.38	1,448.5	43.14	5.21	1,741.5	38.45	5.58	1,652.5	38.26	5.27
Clinic Visit	443.6	48.44	1.79	344.2	65.61	1.88	498.6	72.87	3.03	413.9	87.42	3.02	505.9	76.86	3.24	458.3	81.67	3.12
Other Professional	5,084.1	17.33	7.34	5,092.2	17.33	7.35	8,080.6	13.49	9.08	7,817.9	13.49	8.79	7,404.9	16.56	10.22	7,060.1	16.56	9.74
<b>Total PMPM</b>			\$106.17			\$118.16			\$116.59			\$120.40			\$118.56			\$114.67
<b>Member Months</b>			527,599			527,599			522,396			522,396			402,419			402,419
<b>Morbidity Adjustment</b>						1.075						1.080						1.077

State of Indiana  
Office of Medicaid Policy & Planning  
Calendar Year 2007 Capitation Rates  
Base PCCM Claims Experience

4/25/2006  
8:12 AM

Population: Adult Males Non-MAU  
Package: AB

Category of Service	State Fiscal Year 2003 Claims Experience						State Fiscal Year 2004 Claims Experience						State Fiscal Year 2005 Claims Experience					
	Actual			Trended & Completed			Actual			Trended & Completed			Actual			Trended & Completed		
	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM
<b>Inpatient Hospital</b>																		
Medical/Surgical	368.7	\$1,344.74	\$41.32	303.2	\$1,397.89	35.32	317.9	\$1,621.53	\$42.96	270.5	\$1,659.68	37.41	252.5	\$1,634.18	\$34.39	224.1	\$1,646.89	30.76
Well Newborn	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00
Behavioral Health	134.7	556.72	6.25	138.6	530.59	6.13	117.9	528.22	5.19	114.7	513.20	4.91	115.4	492.07	4.73	107.2	487.36	4.35
Other Inpatient	-	0.00	0.00	-	0.00	0.00	4.1	1,280.36	0.44	3.5	1,310.49	0.38	11.0	2,594.88	2.39	9.8	2,615.07	2.13
<b>Outpatient Hospital</b>																		
Emergency Room	1,312.2	\$76.50	\$8.37	1,302.3	\$78.36	8.50	1,397.2	\$76.11	\$8.86	1,330.5	\$77.22	8.56	1,377.1	\$72.65	\$8.34	1,268.0	\$73.01	7.71
Other Outpatient	9,030.2	53.41	40.19	8,962.4	54.71	40.86	9,457.0	50.47	39.77	9,005.9	51.20	38.42	9,585.4	48.22	38.52	8,826.2	48.46	35.64
<b>Pharmacy</b>																		
Prescription/OTC Drugs	19,566.5	\$52.23	\$85.16	18,268.0	\$56.19	85.54	21,211.1	\$53.17	\$93.98	19,471.8	\$55.55	90.14	19,381.3	\$57.08	\$92.19	17,580.3	\$57.92	84.86
<b>Ancillaries</b>																		
Transportation	10,765.7	\$3.49	\$3.13	10,684.9	\$4.26	3.79	13,721.8	\$3.50	\$4.00	13,067.1	\$3.94	4.29	14,548.3	\$3.12	\$3.78	13,477.7	\$3.24	3.64
Ancillary	10,627.5	9.11	8.06	11,731.8	9.53	9.32	18,284.0	6.30	9.60	18,559.5	6.48	10.02	18,389.2	5.70	8.73	17,372.8	5.75	8.33
<b>Physician</b>																		
Surgery	2,904.4	\$62.84	\$15.21	2,711.6	\$62.84	14.20	1,697.2	\$104.43	\$14.77	1,558.0	\$104.43	13.56	1,049.5	\$163.61	\$14.31	965.6	\$163.61	13.17
Office Visits/Consults	4,397.7	32.30	11.84	4,105.9	32.30	11.05	4,765.8	30.05	11.93	4,375.0	30.05	10.95	4,606.4	30.10	11.56	4,238.2	30.10	10.63
Well Baby/Physical Exams	34.3	36.43	0.10	32.0	36.43	0.10	33.0	33.35	0.09	30.3	33.35	0.08	30.0	32.83	0.08	27.6	32.83	0.08
Hospital Inpatient Visits	609.9	49.68	2.52	569.4	49.68	2.36	560.2	48.98	2.29	514.2	48.98	2.10	506.3	51.96	2.19	465.9	51.96	2.02
Emergency Room Visits	1,367.0	47.43	5.40	1,276.3	47.43	5.04	1,409.6	47.77	5.61	1,294.0	47.77	5.15	1,321.0	49.83	5.49	1,215.4	49.83	5.05
Radiology/Pathology	4,112.2	24.02	8.23	4,698.8	25.42	9.95	4,266.2	27.08	9.63	4,421.0	28.01	10.32	4,273.4	28.57	10.17	4,064.9	28.89	9.79
Outpatient Behavioral Health	1,158.6	44.51	4.30	1,192.1	42.42	4.21	1,208.6	43.90	4.42	1,176.1	42.65	4.18	1,315.0	40.62	4.45	1,222.4	40.23	4.10
Clinic Visit	387.7	69.00	2.23	353.1	77.95	2.29	572.3	80.85	3.86	517.6	86.99	3.75	608.8	81.21	4.12	557.3	83.22	3.87
Other Professional	9,083.7	20.04	15.17	8,907.0	20.04	14.87	10,953.3	18.60	16.98	10,355.3	18.60	16.05	10,615.4	19.33	17.10	9,863.3	19.33	15.89
<b>Total PMPM</b>			\$257.48			\$253.55			\$274.39			\$260.29			\$262.54			\$242.01
<b>Member Months</b>			47,911			47,911			52,314			52,314			38,063			38,063
<b>Morbidity Adjustment</b>						1.098						1.106						1.108

State of Indiana  
Office of Medicaid Policy & Planning  
Calendar Year 2007 Capitation Rates  
Base PCCM Claims Experience

4/25/2006  
8:12 AM

Population: Adult Females Non-MAU  
Package: AB

Category of Service	State Fiscal Year 2003 Claims Experience						State Fiscal Year 2004 Claims Experience						State Fiscal Year 2005 Claims Experience					
	Actual			Trended & Completed			Actual			Trended & Completed			Actual			Trended & Completed		
	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM
<b>Inpatient Hospital</b>																		
Medical/Surgical	324.1	\$1,124.71	\$30.38	266.5	\$1,169.16	25.97	328.7	\$1,123.78	\$30.78	279.6	\$1,150.22	26.80	284.0	\$1,097.05	\$25.96	252.0	\$1,105.59	23.22
Well Newborn	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00
Behavioral Health	70.8	546.98	3.23	72.9	521.31	3.17	90.8	489.37	3.70	88.3	475.46	3.50	85.9	476.77	3.41	79.8	472.21	3.14
Other Inpatient	-	0.00	(0.00)	-	0.00	(0.00)	7.8	991.14	0.65	6.7	1,014.46	0.56	10.2	1,033.40	0.88	9.1	1,041.44	0.79
<b>Outpatient Hospital</b>																		
Emergency Room	1,285.8	\$75.89	\$8.13	1,276.1	\$77.74	8.27	1,403.6	\$75.04	\$8.78	1,336.7	\$76.13	8.48	1,415.1	\$71.84	\$8.47	1,303.0	\$72.19	7.84
Other Outpatient	12,485.7	40.60	42.24	12,391.9	41.59	42.94	13,750.7	40.51	46.41	13,094.7	41.09	44.84	14,102.9	38.66	45.44	12,985.9	38.85	42.04
<b>Pharmacy</b>																		
Prescription/OTC Drugs	20,327.6	\$40.52	\$68.63	18,978.6	\$43.59	68.95	22,886.0	\$41.69	\$79.51	21,009.3	\$43.56	76.27	20,485.8	\$43.59	\$74.41	18,582.1	\$44.23	68.49
<b>Ancillaries</b>																		
Transportation	9,820.9	\$3.40	\$2.78	9,747.1	\$4.14	3.36	11,969.8	\$3.16	\$3.16	11,398.8	\$3.56	3.38	11,597.9	\$3.31	\$3.20	10,744.4	\$3.44	3.08
Ancillary	6,355.6	5.67	3.00	7,016.0	5.93	3.47	12,478.1	3.99	4.15	12,666.1	4.10	4.33	11,433.8	4.39	4.18	10,801.8	4.43	3.99
<b>Physician</b>																		
Surgery	6,299.7	\$33.05	\$17.35	5,881.6	\$33.05	16.20	2,834.9	\$63.63	\$15.03	2,602.4	\$63.63	13.80	1,111.7	\$146.18	\$13.54	1,022.8	\$146.18	12.46
Office Visits/Consults	4,672.4	30.81	12.00	4,362.4	30.81	11.20	5,056.0	29.14	12.28	4,641.4	29.14	11.27	4,970.2	29.49	12.21	4,573.0	29.49	11.24
Well Baby/Physical Exams	150.7	34.75	0.44	140.7	34.75	0.41	171.4	32.10	0.46	157.3	32.10	0.42	172.0	31.30	0.45	158.2	31.30	0.41
Hospital Inpatient Visits	716.4	52.89	3.16	668.8	52.89	2.95	806.1	50.76	3.41	740.0	50.76	3.13	778.9	52.73	3.42	716.6	52.73	3.15
Emergency Room Visits	1,324.3	48.03	5.30	1,236.4	48.03	4.95	1,433.9	48.96	5.85	1,316.3	48.96	5.37	1,373.8	50.36	5.77	1,264.0	50.36	5.31
Radiology/Pathology	8,265.1	19.42	13.37	9,444.1	20.54	16.17	9,406.2	19.60	15.36	9,747.6	20.27	16.47	9,100.2	21.00	15.92	8,656.1	21.24	15.32
Outpatient Behavioral Health	1,337.3	46.14	5.14	1,375.9	43.97	5.04	1,418.6	45.13	5.34	1,380.4	43.85	5.04	1,652.2	36.18	4.98	1,535.9	35.83	4.59
Clinic Visit	720.7	55.31	3.32	656.4	62.49	3.42	820.8	81.99	5.61	742.3	88.22	5.46	813.3	83.90	5.69	744.6	85.97	5.33
Other Professional	8,164.0	17.48	11.89	8,005.2	17.48	11.66	13,314.7	14.84	16.46	12,587.7	14.84	15.56	14,504.4	16.03	19.37	13,476.7	16.03	18.00
<b>Total PMPM</b>			\$230.37			\$228.11			\$256.93			\$244.69			\$247.31			\$228.39
<b>Member Months</b>			340,637			340,637			343,360			343,360			252,238			252,238
<b>Morbidity Adjustment</b>						1.098						1.106						1.108

State of Indiana  
Office of Medicaid Policy & Planning  
Calendar Year 2007 Capitation Rates  
Base PCCM Claims Experience

4/25/2006  
8:12 AM

Population: Newborns Non-MAU  
Package: C

Category of Service	State Fiscal Year 2003 Claims Experience						State Fiscal Year 2004 Claims Experience						State Fiscal Year 2005 Claims Experience					
	Actual			Trended & Completed			Actual			Trended & Completed			Actual			Trended & Completed		
	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM
<b>Inpatient Hospital</b>																		
Medical/Surgical	931.5	\$699.42	\$54.29	1,077.6	\$574.83	51.62	770.6	\$852.94	\$54.77	841.0	\$758.23	53.14	1,145.3	\$715.11	\$68.25	1,180.7	\$687.60	67.65
Well Newborn	438.4	353.77	12.92	460.6	353.77	13.58	480.8	436.44	17.49	495.3	436.44	18.01	583.7	308.39	15.00	590.3	308.39	15.17
Behavioral Health	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00
Other Inpatient	194.8	25.69	0.42	225.4	21.12	0.40	-	0.00	0.00	-	0.00	0.00	7.4	1,064.99	0.66	7.6	1,024.01	0.65
<b>Outpatient Hospital</b>																		
Emergency Room	517.5	\$75.80	\$3.27	656.7	\$77.53	4.24	592.8	\$77.63	\$3.83	683.9	\$78.69	4.48	642.9	\$73.78	\$3.95	675.5	\$74.11	4.17
Other Outpatient	3,409.4	43.38	12.33	4,326.8	44.37	16.00	4,379.8	36.97	13.49	5,052.9	37.47	15.78	3,273.4	42.56	11.61	3,439.7	42.75	12.26
<b>Pharmacy</b>																		
Prescription/OTC Drugs	4,414.0	\$42.06	\$15.47	4,986.6	\$55.72	23.15	4,755.2	\$39.51	\$15.66	5,116.3	\$46.77	19.94	3,665.0	\$25.38	\$7.75	3,755.8	\$26.85	8.40
<b>Ancillaries</b>																		
Transportation	712.3	\$62.16	\$3.69	694.7	\$62.16	3.60	1,732.2	\$7.71	\$1.11	1,706.2	\$7.71	1.10	2,903.9	\$2.69	\$0.65	2,915.4	\$2.69	0.65
Ancillary	2,453.6	51.60	10.55	2,838.3	54.07	12.79	6,559.8	24.81	13.56	7,159.0	25.52	15.22	3,517.2	29.27	8.58	3,638.3	29.55	8.96
<b>Physician</b>																		
Surgery	1,168.9	\$39.47	\$3.85	1,213.3	\$43.48	4.40	843.0	\$53.38	\$3.75	862.1	\$56.57	4.06	613.3	\$78.14	\$3.99	620.5	\$79.66	4.12
Office Visits/Consults	5,004.6	27.52	11.48	5,194.4	30.31	13.12	5,624.6	28.27	13.25	5,751.6	29.96	14.36	4,507.4	27.44	10.31	4,560.5	27.97	10.63
Well Baby/Physical Exams	3,159.8	34.74	9.15	3,279.6	38.26	10.46	3,517.0	33.99	9.96	3,596.4	36.02	10.79	3,199.5	32.49	8.66	3,237.2	33.12	8.94
Hospital Inpatient Visits	1,461.2	62.19	7.57	1,516.6	68.50	8.66	1,666.3	72.01	10.00	1,703.9	76.31	10.84	2,039.4	109.19	18.56	2,063.4	111.32	19.14
Emergency Room Visits	529.7	41.71	1.84	549.8	45.95	2.10	592.8	42.66	2.11	606.1	45.20	2.28	561.6	42.82	2.00	568.2	43.65	2.07
Radiology/Pathology	1,516.0	12.79	1.62	1,880.4	13.38	2.10	2,232.7	11.45	2.13	2,540.8	11.76	2.49	2,017.2	14.28	2.40	2,116.9	14.41	2.54
Outpatient Behavioral Health	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00
Clinic Visit	1,035.0	43.18	3.72	959.1	52.64	4.21	889.1	60.75	4.50	849.4	68.42	4.84	1,270.9	111.37	11.80	1,257.1	115.87	12.14
Other Professional	7,366.8	15.08	9.26	7,931.8	15.08	9.97	8,324.9	29.56	20.51	8,702.3	29.56	21.44	9,243.8	14.77	11.37	9,421.6	14.77	11.59
<b>Total PMPM</b>			\$161.42			\$180.39			\$186.13			\$198.78			\$185.55			\$189.09
<b>Member Months</b>			1,971			1,971			1,822			1,822			1,624			1,624
<b>Morbidity Adjustment</b>						1.000						1.000						1.000

State of Indiana  
Office of Medicaid Policy & Planning  
Calendar Year 2007 Capitation Rates  
Base PCCM Claims Experience

4/25/2006  
8:12 AM

Population: Preschoolers Non-MAU  
Package: C

Category of Service	State Fiscal Year 2003 Claims Experience						State Fiscal Year 2004 Claims Experience						State Fiscal Year 2005 Claims Experience					
	Actual			Trended & Completed			Actual			Trended & Completed			Actual			Trended & Completed		
	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM
<b><i>Inpatient Hospital</i></b>																		
Medical/Surgical	48.1	\$1,214.96	\$4.87	52.6	\$998.53	4.38	72.8	\$712.13	\$4.32	74.8	\$633.05	3.95	64.8	\$877.70	\$4.74	63.1	\$843.93	4.44
Well Newborn	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00
Behavioral Health	8.1	484.67	0.33	8.5	473.10	0.33	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00
Other Inpatient	-	0.00	0.00	-	0.00	0.00	4.5	609.00	0.23	4.6	541.38	0.21	15.2	1,166.00	1.47	14.8	1,121.13	1.38
<b><i>Outpatient Hospital</i></b>																		
Emergency Room	591.4	\$77.09	\$3.80	710.3	\$78.85	4.67	633.8	\$77.13	\$4.07	688.8	\$78.19	4.49	624.2	\$74.62	\$3.88	619.9	\$74.96	3.87
Other Outpatient	3,139.9	53.02	13.87	3,771.4	54.23	17.04	3,286.3	52.58	14.40	3,571.5	53.30	15.86	3,252.9	45.55	12.35	3,230.5	45.76	12.32
<b><i>Pharmacy</i></b>																		
Prescription/OTC Drugs	6,077.6	\$35.45	\$17.95	6,498.6	\$46.96	25.43	6,795.9	\$38.74	\$21.94	6,887.9	\$45.86	26.32	6,225.8	\$42.25	\$21.92	6,029.8	\$44.70	22.46
<b><i>Ancillaries</i></b>																		
Transportation	195.8	\$8.84	\$0.14	180.7	\$8.84	0.13	167.1	\$33.03	\$0.46	155.1	\$33.03	0.43	811.5	\$2.55	\$0.17	770.0	\$2.55	0.16
Ancillary	4,733.9	4.97	1.96	5,183.1	5.21	2.25	10,274.8	4.18	3.58	10,563.2	4.30	3.78	12,094.5	4.31	4.35	11,823.9	4.35	4.29
<b><i>Physician</i></b>																		
Surgery	1,498.4	\$30.47	\$3.81	1,472.0	\$33.57	4.12	626.7	\$59.57	\$3.11	603.7	\$63.13	3.18	390.9	\$87.28	\$2.84	373.8	\$88.98	2.77
Office Visits/Consults	4,536.9	26.30	9.94	4,456.9	28.97	10.76	4,706.4	25.64	10.06	4,533.6	27.17	10.27	4,489.7	26.01	9.73	4,293.2	26.52	9.49
Well Baby/Physical Exams	940.6	35.13	2.75	924.0	38.69	2.98	934.8	32.84	2.56	900.5	34.80	2.61	904.8	32.55	2.45	865.2	33.18	2.39
Hospital Inpatient Visits	129.7	58.62	0.63	127.5	64.56	0.69	129.5	58.52	0.63	124.7	62.01	0.64	131.8	61.29	0.67	126.1	62.48	0.66
Emergency Room Visits	561.3	39.23	1.83	551.4	43.21	1.99	612.7	40.32	2.06	590.2	42.72	2.10	582.2	41.86	2.03	556.7	42.68	1.98
Radiology/Pathology	1,731.8	12.33	1.78	2,033.2	12.90	2.19	1,731.2	12.62	1.82	1,855.9	12.97	2.01	1,573.9	12.54	1.64	1,561.0	12.66	1.65
Outpatient Behavioral Health	214.9	52.08	0.93	235.3	52.08	1.02	320.9	48.84	1.31	329.9	48.84	1.34	176.5	48.95	0.72	172.6	48.95	0.70
Clinic Visit	360.3	51.91	1.56	316.0	63.28	1.67	488.2	91.19	3.71	439.4	102.70	3.76	444.5	65.04	2.41	415.5	67.67	2.34
Other Professional	4,196.9	14.09	4.93	4,277.0	14.09	5.02	5,951.8	10.62	5.27	5,860.9	10.62	5.19	5,556.2	12.07	5.59	5,352.2	12.07	5.38
<b>Total PMPM</b>			\$71.09			\$84.66			\$79.52			\$86.13			\$76.97			\$76.28
<b>Member Months</b>			20,718			20,718			23,914			23,914			20,570			20,570
<b>Morbidity Adjustment</b>						1.057						1.062						1.058

State of Indiana  
Office of Medicaid Policy & Planning  
Calendar Year 2007 Capitation Rates  
Base PCCM Claims Experience

4/25/2006  
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Population: Children Non-MAU  
Package: C

Category of Service	State Fiscal Year 2003 Claims Experience						State Fiscal Year 2004 Claims Experience						State Fiscal Year 2005 Claims Experience					
	Actual			Trended & Completed			Actual			Trended & Completed			Actual			Trended & Completed		
	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM
<b><i>Inpatient Hospital</i></b>																		
Medical/Surgical	49.2	\$1,078.79	\$4.42	53.8	\$886.62	3.98	37.5	\$1,279.56	\$4.00	38.6	\$1,137.48	3.65	43.9	\$1,419.04	\$5.19	42.7	\$1,364.44	4.86
Well Newborn	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00
Behavioral Health	25.9	597.40	1.29	27.1	583.14	1.32	21.8	479.45	0.87	21.7	472.55	0.86	36.5	494.33	1.50	35.2	491.95	1.44
Other Inpatient	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	1.3	705.53	0.08	1.3	678.38	0.07
<b><i>Outpatient Hospital</i></b>																		
Emergency Room	356.6	\$79.78	\$2.37	428.4	\$81.61	2.91	358.1	\$77.85	\$2.32	389.2	\$78.92	2.56	366.9	\$76.18	\$2.33	364.4	\$76.53	2.32
Other Outpatient	2,224.7	46.05	8.54	2,672.2	47.10	10.49	2,652.1	43.25	9.56	2,882.3	43.84	10.53	2,885.9	42.68	10.26	2,866.1	42.88	10.24
<b><i>Pharmacy</i></b>																		
Prescription/OTC Drugs	6,379.7	\$51.80	\$27.54	6,821.5	\$68.62	39.01	7,209.2	\$61.48	\$36.93	7,306.9	\$72.78	44.31	6,868.2	\$66.68	\$38.16	6,652.0	\$70.54	39.10
<b><i>Ancillaries</i></b>																		
Transportation	176.1	\$11.16	\$0.16	162.5	\$11.16	0.15	406.9	\$3.49	\$0.12	377.6	\$3.49	0.11	994.0	\$4.03	\$0.33	943.1	\$4.03	0.32
Ancillary	6,684.4	2.74	1.52	7,318.8	2.87	1.75	9,814.8	3.10	2.54	10,090.2	3.19	2.68	11,424.6	2.94	2.80	11,169.0	2.97	2.76
<b><i>Physician</i></b>																		
Surgery	979.2	\$37.49	\$3.06	961.9	\$41.29	3.31	526.5	\$54.80	\$2.40	507.2	\$58.07	2.45	356.5	\$93.78	\$2.79	340.9	\$95.61	2.72
Office Visits/Consults	3,113.6	27.33	7.09	3,058.7	30.10	7.67	3,231.5	26.60	7.16	3,112.9	28.19	7.31	3,406.1	26.58	7.55	3,257.1	27.10	7.36
Well Baby/Physical Exams	315.5	34.16	0.90	310.0	37.63	0.97	325.9	32.86	0.89	313.9	34.82	0.91	307.9	33.00	0.85	294.4	33.65	0.83
Hospital Inpatient Visits	118.4	51.19	0.51	116.3	56.39	0.55	104.6	52.83	0.46	100.8	55.98	0.47	110.7	51.71	0.48	105.9	52.72	0.47
Emergency Room Visits	337.0	40.65	1.14	331.0	44.77	1.24	344.6	41.49	1.19	332.0	43.96	1.22	352.2	42.07	1.23	336.8	42.89	1.20
Radiology/Pathology	1,592.3	14.74	1.96	1,869.4	15.42	2.40	1,634.3	15.09	2.05	1,752.0	15.50	2.26	1,710.0	15.67	2.23	1,695.9	15.81	2.23
Outpatient Behavioral Health	1,512.3	49.20	6.20	1,655.9	49.20	6.79	1,595.3	48.18	6.40	1,640.1	48.18	6.58	1,302.7	49.73	5.40	1,274.2	49.73	5.28
Clinic Visit	236.9	60.97	1.20	207.7	74.33	1.29	324.0	71.15	1.92	291.6	80.13	1.95	375.2	73.54	2.30	350.7	76.51	2.24
Other Professional	5,636.0	15.10	7.09	5,743.5	15.10	7.23	6,928.8	15.16	8.76	6,823.0	15.16	8.62	7,964.7	14.91	9.90	7,672.2	14.91	9.54
<b>Total PMPM</b>			\$74.99			\$91.04			\$87.59			\$96.49			\$93.38			\$92.97
<b>Member Months</b>			26,851			26,851			31,999			31,999			27,635			27,635
<b>Morbidity Adjustment</b>						1.057						1.062						1.058

State of Indiana  
Office of Medicaid Policy & Planning  
Calendar Year 2007 Capitation Rates  
Base PCCM Claims Experience

4/25/2006  
8:12 AM

Population: Adolescents Non-MAU  
Package: C

Category of Service	State Fiscal Year 2003 Claims Experience						State Fiscal Year 2004 Claims Experience						State Fiscal Year 2005 Claims Experience					
	Actual			Trended & Completed			Actual			Trended & Completed			Actual			Trended & Completed		
	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM
<b>Inpatient Hospital</b>																		
Medical/Surgical	59.0	\$1,763.24	\$8.67	64.6	\$1,449.15	7.80	49.5	\$1,555.57	\$6.41	50.9	\$1,382.83	5.86	65.1	\$1,017.59	\$5.52	63.4	\$978.44	5.17
Well Newborn	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00
Behavioral Health	64.0	495.63	2.64	66.8	483.80	2.69	73.3	490.72	3.00	73.3	483.66	2.95	101.6	499.98	4.23	97.9	497.57	4.06
Other Inpatient	-	0.00	0.00	-	0.00	0.00	1.2	1,348.32	0.13	1.2	1,198.60	0.12	-	0.00	0.00	-	0.00	0.00
<b>Outpatient Hospital</b>																		
Emergency Room	450.3	\$79.65	\$2.99	540.9	\$81.48	3.67	517.4	\$76.54	\$3.30	562.4	\$77.58	3.64	474.2	\$74.03	\$2.93	470.9	\$74.36	2.92
Other Outpatient	3,702.4	38.13	11.77	4,447.1	39.00	14.45	3,961.3	38.53	12.72	4,305.1	39.05	14.01	4,155.2	36.80	12.74	4,126.6	36.97	12.71
<b>Pharmacy</b>																		
Prescription/OTC Drugs	7,992.6	\$54.76	\$36.48	8,546.1	\$72.55	51.67	9,115.4	\$58.98	\$44.80	9,238.9	\$69.82	53.76	8,959.8	\$66.81	\$49.89	8,677.7	\$70.68	51.11
<b>Ancillaries</b>																		
Transportation	417.9	\$23.86	\$0.83	385.8	\$23.86	0.77	754.1	\$9.32	\$0.59	699.7	\$9.32	0.54	2,398.7	\$3.98	\$0.80	2,276.0	\$3.98	0.76
Ancillary	11,588.5	2.16	2.08	12,688.3	2.26	2.39	7,323.4	4.28	2.61	7,528.9	4.40	2.76	11,452.1	3.16	3.02	11,195.9	3.19	2.98
<b>Physician</b>																		
Surgery	1,099.9	\$52.63	\$4.82	1,080.5	\$57.97	5.22	605.1	\$80.15	\$4.04	582.9	\$84.94	4.13	455.6	\$100.42	\$3.81	435.6	\$102.38	3.72
Office Visits/Consults	3,349.2	28.72	8.02	3,290.2	31.63	8.67	3,578.6	26.01	7.76	3,447.3	27.56	7.92	3,752.1	26.40	8.25	3,587.9	26.92	8.05
Well Baby/Physical Exams	287.0	31.61	0.76	282.0	34.82	0.82	324.9	29.39	0.80	313.0	31.14	0.81	303.5	28.77	0.73	290.2	29.34	0.71
Hospital Inpatient Visits	199.3	50.49	0.84	195.7	55.61	0.91	175.3	49.89	0.73	168.8	52.87	0.74	217.2	54.09	0.98	207.7	55.14	0.95
Emergency Room Visits	458.2	42.94	1.64	450.1	47.30	1.77	684.4	31.82	1.81	659.2	33.72	1.85	456.9	46.93	1.79	436.9	47.84	1.74
Radiology/Pathology	2,199.7	19.47	3.57	2,582.5	20.38	4.39	2,488.5	16.99	3.52	2,667.7	17.46	3.88	2,485.7	19.20	3.98	2,465.2	19.37	3.98
Outpatient Behavioral Health	1,769.6	45.20	6.67	1,937.5	45.20	7.30	1,778.2	45.55	6.75	1,828.1	45.55	6.94	1,697.7	46.74	6.61	1,660.5	46.74	6.47
Clinic Visit	330.9	57.41	1.58	290.2	69.99	1.69	480.5	68.11	2.73	432.5	76.70	2.76	560.5	73.71	3.44	523.9	76.69	3.35
Other Professional	5,351.2	18.57	8.28	5,453.2	18.57	8.44	6,953.8	16.03	9.29	6,847.6	16.03	9.15	7,511.5	17.09	10.70	7,235.6	17.09	10.30
<b>Total PMPM</b>			\$101.63			\$122.65			\$110.99			\$121.83			\$119.41			\$118.97
<b>Member Months</b>			16,682			16,682			20,130			20,130			18,070			18,070
<b>Morbidity Adjustment</b>						1.057						1.062						1.058



State of Indiana  
Office of Medicaid Policy & Planning  
Calendar Year 2007 Capitation Rates  
Base PCCM Claims Experience

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Population: Maternity Non-MAU  
Package: AB

Category of Service	State Fiscal Year 2003 Claims Experience						State Fiscal Year 2004 Claims Experience						State Fiscal Year 2005 Claims Experience					
	Actual			Trended & Completed			Actual			Trended & Completed			Actual			Trended & Completed		
	Util Per Delivery	Cost Per Service	Cost Per Delivery	Util Per Delivery	Cost Per Service	Cost Per Delivery	Util Per Delivery	Cost Per Service	Cost Per Delivery	Util Per Delivery	Cost Per Service	Cost Per Delivery	Util Per Delivery	Cost Per Service	Cost Per Delivery	Util Per Delivery	Cost Per Service	Cost Per Delivery
<i>Inpatient Hospital</i>																		
Maternity Delivery	2.4	\$831.71	\$1,982.47	2.4	\$906.41	2,160.52	2.4	\$840.30	\$2,052.70	2.4	\$884.80	2,161.41	2.4	\$831.49	\$2,028.38	2.4	\$845.92	2,063.57
<i>Physician</i>																		
Normal Deliveries	0.7	\$655.12	\$472.06	0.7	\$705.36	508.26	0.7	\$658.81	\$451.39	0.7	\$688.68	471.85	0.7	\$659.02	\$428.70	0.7	\$668.83	435.08
Cesarean Deliveries	0.2	736.31	168.12	0.2	792.78	181.02	0.2	742.06	175.69	0.2	775.71	183.65	0.3	745.16	189.39	0.3	756.25	192.21
Non-Deliveries	8.7	31.44	273.23	8.7	33.86	294.19	9.2	29.72	273.88	9.2	31.07	286.30	9.2	30.79	282.46	9.2	31.25	286.66
<b>Total Cost Per Delivery</b>		\$2,895.89				\$3,143.99			\$2,953.66			\$3,103.21			\$2,928.93			\$2,977.53
<b>Deliveries</b>			14,111			14,111			13,985			13,985			10,627			10,627
<b>Morbidity Adjustment</b>						1.000						1.000						1.000

State of Indiana  
Office of Medicaid Policy & Planning  
Calendar Year 2007 Capitation Rates  
Base PCCM Claims Experience

4/25/2006  
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Population: Newborns MAU  
Package: AB

Category of Service	State Fiscal Year 2003 Claims Experience						State Fiscal Year 2004 Claims Experience						State Fiscal Year 2005 Claims Experience					
	Actual			Trended & Completed			Actual			Trended & Completed			Actual			Trended & Completed		
	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM
<b>Inpatient Hospital</b>																		
Medical/Surgical	10,826.1	\$129.01	\$116.39	11,345.2	\$129.32	122.26	1,500.0	\$832.56	\$104.07	1,511.5	\$833.76	105.02	5,924.1	\$1,424.48	\$703.22	5,866.0	\$1,425.17	696.67
Well Newborn	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00
Behavioral Health	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00
Other Inpatient	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	303.8	549.03	13.90	300.8	549.29	13.77
<b>Outpatient Hospital</b>																		
Emergency Room	1,565.2	\$30.77	\$4.01	1,782.5	\$30.48	4.53	2,062.5	\$77.79	\$13.37	2,184.7	\$77.36	14.08	2,582.3	\$60.84	\$13.09	2,566.9	\$60.73	12.99
Other Outpatient	63,000.0	4.76	25.00	71,744.4	4.72	28.21	9,750.0	51.18	41.58	10,327.4	50.89	43.80	19,139.2	22.88	36.49	19,025.2	22.83	36.20
<b>Pharmacy</b>																		
Prescription/OTC Drugs	6,913.0	\$94.13	\$54.23	7,689.9	\$110.45	70.78	8,812.5	\$10.73	\$7.88	9,203.9	\$11.81	9.06	10,025.3	\$157.30	\$131.42	9,892.9	\$162.42	133.90
<b>Ancillaries</b>																		
Transportation	18,652.2	\$4.38	\$6.82	19,546.5	\$4.33	7.06	70,875.0	\$1.83	\$10.79	71,419.4	\$1.81	10.79	95,240.5	\$4.57	\$36.24	94,094.7	\$4.56	35.72
Ancillary	63,130.4	6.86	36.07	70,225.0	7.18	42.04	19,125.0	42.34	67.48	19,974.4	43.54	72.48	133,519.0	6.70	74.54	132,366.6	6.76	74.59
<b>Physician</b>																		
Surgery	12,782.6	\$59.55	\$63.44	13,557.9	\$61.87	69.90	-	\$0.00	\$0.00	-	\$0.00	-	1,974.7	\$126.36	\$20.79	1,953.3	\$127.33	20.73
Office Visits/Consults	6,391.3	33.31	17.74	6,778.9	34.61	19.55	3,000.0	49.63	12.41	3,045.0	50.78	12.89	7,746.8	47.26	30.51	7,663.1	47.62	30.41
Well Baby/Physical Exams	1,043.5	37.36	3.25	1,106.8	38.81	3.58	750.0	27.84	1.74	761.2	28.48	1.81	1,974.7	31.52	5.19	1,953.3	31.76	5.17
Hospital Inpatient Visits	12,260.9	104.51	106.79	13,004.5	108.58	117.67	187.5	49.31	0.77	190.3	50.45	0.80	6,075.9	48.91	24.77	6,010.3	49.29	24.69
Emergency Room Visits	521.7	49.60	2.16	553.4	51.53	2.38	1,687.5	57.81	8.13	1,712.8	59.15	8.44	1,519.0	85.32	10.80	1,502.6	85.97	10.76
Radiology/Pathology	7,304.3	15.08	9.18	8,318.2	14.22	9.86	1,500.0	15.47	1.93	1,588.8	14.93	1.98	12,455.7	14.82	15.39	12,440.9	14.65	15.19
Outpatient Behavioral Health	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00
Clinic Visit	4,434.8	221.70	81.93	3,556.9	300.29	89.01	750.0	0.00	0.00	643.7	0.00	0.00	1,822.8	368.62	55.99	1,705.1	391.68	55.65
Other Professional	9,652.2	168.06	135.18	9,993.2	168.06	139.96	2,437.5	80.06	16.26	2,438.4	80.06	16.27	18,227.8	66.52	101.04	17,944.0	66.52	99.46
<b>Total PMPM</b>			\$662.17			\$726.76			\$286.41			\$297.41			\$1,273.37			\$1,265.90
<b>Member Months</b>			92			92			64			64			79			79
<b>Morbidity Adjustment</b>						1.040						1.045						1.043

State of Indiana  
Office of Medicaid Policy & Planning  
Calendar Year 2007 Capitation Rates  
Base PCCM Claims Experience

4/25/2006  
8:12 AM

Population: Preschoolers MAU  
Package: AB

Category of Service	State Fiscal Year 2003 Claims Experience						State Fiscal Year 2004 Claims Experience						State Fiscal Year 2005 Claims Experience					
	Actual			Trended & Completed			Actual			Trended & Completed			Actual			Trended & Completed		
	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM
<b>Inpatient Hospital</b>																		
Medical/Surgical	942.6	\$1,026.97	\$80.67	955.6	\$1,029.45	81.98	783.7	\$1,093.11	\$71.39	763.7	\$1,094.69	69.67	676.5	\$1,135.62	\$64.02	648.8	\$1,136.17	61.43
Well Newborn	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00
Behavioral Health	251.1	482.70	10.10	257.6	471.18	10.12	147.1	475.28	5.83	144.4	468.44	5.64	173.5	477.12	6.90	164.5	474.82	6.51
Other Inpatient	-	0.00	0.00	-	0.00	0.00	6.4	2,289.79	1.22	6.2	2,293.10	1.19	10.8	1,279.25	1.16	10.4	1,279.87	1.11
<b>Outpatient Hospital</b>																		
Emergency Room	1,422.2	\$77.40	\$9.17	1,566.8	\$76.68	10.01	1,373.9	\$76.83	\$8.80	1,407.4	\$76.40	8.96	1,355.3	\$74.39	\$8.40	1,304.8	\$74.25	8.07
Other Outpatient	14,730.1	62.87	77.17	16,227.9	62.28	84.23	17,447.4	44.91	65.30	17,873.0	44.66	66.51	14,116.4	47.59	55.99	13,590.5	47.50	53.80
<b>Pharmacy</b>																		
Prescription/OTC Drugs	15,244.3	\$55.32	\$70.27	16,404.6	\$64.90	88.73	17,516.2	\$52.33	\$76.39	17,692.5	\$57.60	84.92	18,164.8	\$75.62	\$114.46	17,360.6	\$78.07	112.95
<b>Ancillaries</b>																		
Transportation	66,538.2	\$1.81	\$10.06	67,455.4	\$1.79	10.07	80,883.2	\$1.87	\$12.57	78,824.0	\$1.85	12.17	74,506.7	\$1.81	\$11.24	71,293.1	\$1.81	10.73
Ancillary	271,168.1	2.91	65.78	291,808.5	3.05	74.17	259,786.8	2.98	64.55	262,401.2	3.07	67.05	292,833.3	3.02	73.59	281,167.1	3.04	71.32
<b>Physician</b>																		
Surgery	5,485.8	\$34.88	\$15.95	5,628.9	\$36.24	17.00	2,397.4	\$66.12	\$13.21	2,353.4	\$67.65	13.27	1,071.2	\$164.30	\$14.67	1,026.3	\$165.56	14.16
Office Visits/Consults	6,060.1	29.80	15.05	6,218.1	30.96	16.04	6,355.9	29.65	15.70	6,239.0	30.33	15.77	6,058.5	29.82	15.06	5,804.4	30.05	14.54
Well Baby/Physical Exams	703.6	34.80	2.04	721.9	36.15	2.17	722.9	30.49	1.84	709.6	31.20	1.85	650.5	31.12	1.69	623.2	31.36	1.63
Hospital Inpatient Visits	1,453.8	48.34	5.86	1,491.7	50.22	6.24	1,228.3	50.92	5.21	1,205.7	52.09	5.23	1,097.2	57.19	5.23	1,051.2	57.63	5.05
Emergency Room Visits	1,440.2	44.90	5.39	1,477.8	46.65	5.74	1,393.0	46.44	5.39	1,367.4	47.51	5.41	1,331.4	44.92	4.98	1,275.6	45.26	4.81
Radiology/Pathology	4,188.4	14.74	5.15	4,614.3	13.90	5.34	4,172.7	13.52	4.70	4,274.5	13.05	4.65	3,250.7	16.24	4.40	3,144.6	16.05	4.21
Outpatient Behavioral Health	1,262.8	57.23	6.02	1,295.8	55.86	6.03	1,189.9	54.97	5.45	1,168.0	54.18	5.27	1,238.2	51.27	5.29	1,174.9	51.03	5.00
Clinic Visit	436.0	69.53	2.53	338.3	94.18	2.65	721.3	137.16	8.24	598.7	164.54	8.21	962.8	150.00	12.03	872.2	159.38	11.58
Other Professional	8,555.8	26.72	19.05	8,569.3	26.72	19.08	13,280.3	28.13	31.13	12,848.5	28.13	30.12	19,384.5	20.18	32.59	18,481.9	20.18	31.08
<b>Total PMPM</b>			\$400.25			\$439.62			\$396.92			\$405.90			\$431.70			\$417.97
<b>Member Months</b>			7,982			7,982			7,503			7,503			5,534			5,534
<b>Morbidity Adjustment</b>						1.075						1.080						1.077

State of Indiana  
Office of Medicaid Policy & Planning  
Calendar Year 2007 Capitation Rates  
Base PCCM Claims Experience

4/25/2006  
8:12 AM

Population: Children MAU  
Package: AB

Category of Service	State Fiscal Year 2003 Claims Experience						State Fiscal Year 2004 Claims Experience						State Fiscal Year 2005 Claims Experience					
	Actual			Trended & Completed			Actual			Trended & Completed			Actual			Trended & Completed		
	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM
<b>Inpatient Hospital</b>																		
Medical/Surgical	281.4	\$924.86	\$21.69	285.3	\$927.10	22.04	206.9	\$1,077.18	\$18.57	201.6	\$1,078.74	18.12	196.6	\$1,384.29	\$22.67	188.5	\$1,384.96	21.76
Well Newborn	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00
Behavioral Health	922.4	475.08	36.52	946.4	463.74	36.58	1,096.0	474.84	43.37	1,075.8	468.01	41.96	1,190.4	481.60	47.77	1,129.0	479.27	45.09
Other Inpatient	-	0.00	0.00	-	0.00	0.00	3.6	625.41	0.19	3.5	626.32	0.18	7.0	1,526.95	0.89	6.7	1,527.69	0.86
<b>Outpatient Hospital</b>																		
Emergency Room	728.6	\$78.94	\$4.79	802.7	\$78.20	5.23	715.1	\$77.89	\$4.64	732.6	\$77.45	4.73	720.0	\$75.15	\$4.51	693.2	\$75.01	4.33
Other Outpatient	6,123.9	43.97	22.44	6,746.6	43.56	24.49	7,354.1	41.81	25.62	7,533.4	41.58	26.10	7,687.8	37.24	23.86	7,401.4	37.17	22.92
<b>Pharmacy</b>																		
Prescription/OTC Drugs	17,917.8	\$75.31	\$112.45	19,281.7	\$88.36	141.98	21,075.7	\$84.06	\$147.63	21,287.8	\$92.52	164.13	21,079.7	\$91.46	\$160.67	20,146.5	\$94.44	158.55
<b>Ancillaries</b>																		
Transportation	31,792.7	\$2.74	\$7.25	32,231.0	\$2.70	7.26	40,701.1	\$2.11	\$7.14	39,664.9	\$2.09	6.91	44,367.7	\$2.32	\$8.56	42,454.0	\$2.31	8.17
Ancillary	99,784.8	2.55	21.20	107,380.0	2.67	23.91	128,586.8	2.24	24.02	129,880.8	2.31	24.96	137,912.5	1.93	22.24	132,418.2	1.95	21.55
<b>Physician</b>																		
Surgery	1,728.4	\$39.93	\$5.75	1,773.4	\$41.48	6.13	704.4	\$82.83	\$4.86	691.5	\$84.75	4.88	447.3	\$108.51	\$4.04	428.5	\$109.34	3.90
Office Visits/Consults	3,803.9	29.22	9.26	3,903.1	30.36	9.87	3,991.0	27.84	9.26	3,917.6	28.48	9.30	4,063.5	28.59	9.68	3,893.1	28.81	9.35
Well Baby/Physical Exams	276.6	34.25	0.79	283.9	35.59	0.84	239.1	31.25	0.62	234.7	31.98	0.63	260.7	33.01	0.72	249.8	33.26	0.69
Hospital Inpatient Visits	1,174.4	45.00	4.40	1,205.0	46.75	4.69	1,341.5	38.50	4.30	1,316.9	39.39	4.32	1,430.1	44.92	5.35	1,370.1	45.26	5.17
Emergency Room Visits	736.8	42.58	2.61	756.0	44.24	2.79	693.7	43.76	2.53	680.9	44.78	2.54	694.0	43.06	2.49	664.9	43.39	2.40
Radiology/Pathology	2,526.1	13.57	2.86	2,783.0	12.79	2.97	1,967.2	16.20	2.66	2,015.2	15.64	2.63	2,327.6	15.16	2.94	2,251.6	14.98	2.81
Outpatient Behavioral Health	4,875.6	45.63	18.54	5,002.7	44.55	18.57	5,019.6	45.51	19.04	4,927.3	44.85	18.42	4,866.3	44.37	17.99	4,617.7	44.15	16.99
Clinic Visit	343.1	63.03	1.80	266.2	85.37	1.89	458.9	80.19	3.07	380.9	96.21	3.05	509.4	70.80	3.01	461.5	75.23	2.89
Other Professional	5,628.9	21.18	9.93	5,637.8	21.18	9.95	9,228.9	15.76	12.12	8,928.9	15.76	11.73	11,208.8	13.74	12.84	10,686.8	13.74	12.24
<b>Total PMPM</b>			\$282.30			\$319.20			\$329.65			\$344.59			\$350.24			\$339.68
<b>Member Months</b>			17,524			17,524			16,763			16,763			11,966			11,966
<b>Morbidity Adjustment</b>						1.075						1.080						1.077

State of Indiana  
Office of Medicaid Policy & Planning  
Calendar Year 2007 Capitation Rates  
Base PCCM Claims Experience

4/25/2006  
8:12 AM

Population: Adolescents MAU  
Package: AB

Category of Service	State Fiscal Year 2003 Claims Experience						State Fiscal Year 2004 Claims Experience						State Fiscal Year 2005 Claims Experience					
	Actual			Trended & Completed			Actual			Trended & Completed			Actual			Trended & Completed		
	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM
<b>Inpatient Hospital</b>																		
Medical/Surgical	233.6	\$1,377.86	\$26.82	236.8	\$1,381.19	27.26	227.0	\$1,173.05	\$22.19	221.2	\$1,174.75	21.66	293.7	\$949.84	\$23.25	281.7	\$950.30	22.31
Well Newborn	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00
Behavioral Health	638.1	420.48	22.36	654.8	410.45	22.40	925.1	472.91	36.46	908.1	466.10	35.27	706.7	445.71	26.25	670.3	443.56	24.78
Other Inpatient	-	0.00	0.00	-	0.00	0.00	2.1	874.19	0.16	2.1	875.46	0.15	2.9	2,862.21	0.69	2.8	2,863.59	0.67
<b>Outpatient Hospital</b>																		
Emergency Room	988.0	\$77.20	\$6.36	1,088.4	\$76.48	6.94	1,054.1	\$76.18	\$6.69	1,079.8	\$75.76	6.82	975.8	\$76.15	\$6.19	939.4	\$76.01	5.95
Other Outpatient	7,559.0	36.81	23.19	8,327.6	36.47	25.31	7,515.1	35.22	22.05	7,698.4	35.02	22.47	7,125.5	34.47	20.47	6,860.1	34.41	19.67
<b>Pharmacy</b>																		
Prescription/OTC Drugs	17,991.6	\$78.61	\$117.86	19,361.0	\$92.24	148.82	21,187.3	\$83.58	\$147.58	21,400.5	\$92.00	164.07	19,652.0	\$89.48	\$146.53	18,781.9	\$92.38	144.60
<b>Ancillaries</b>																		
Transportation	44,514.2	\$1.83	\$6.79	45,127.8	\$1.81	6.80	43,480.9	\$2.25	\$8.15	42,374.0	\$2.23	7.88	41,210.4	\$2.01	\$6.91	39,432.9	\$2.01	6.59
Ancillary	41,009.5	3.59	12.27	44,131.0	3.85	14.16	62,587.8	2.37	12.34	63,217.7	2.47	13.00	66,602.1	2.88	15.96	63,948.7	2.92	15.54
<b>Physician</b>																		
Surgery	1,747.4	\$42.28	\$6.16	1,792.9	\$43.92	6.56	1,074.3	\$47.89	\$4.29	1,054.6	\$49.00	4.31	504.6	\$147.30	\$6.19	483.4	\$148.43	5.98
Office Visits/Consults	3,628.9	29.34	8.87	3,723.5	30.48	9.46	4,083.1	28.31	9.63	4,008.1	28.96	9.67	3,850.7	27.27	8.75	3,689.2	27.48	8.45
Well Baby/Physical Exams	199.8	31.23	0.52	205.0	32.45	0.55	236.6	28.76	0.57	232.3	29.43	0.57	215.2	29.23	0.52	206.2	29.45	0.51
Hospital Inpatient Visits	830.0	47.25	3.27	851.6	49.09	3.48	1,143.6	42.85	4.08	1,122.6	43.85	4.10	1,001.9	46.04	3.84	959.9	46.39	3.71
Emergency Room Visits	999.9	45.83	3.82	1,026.0	47.61	4.07	1,036.0	46.57	4.02	1,016.9	47.64	4.04	900.1	46.85	3.51	862.4	47.21	3.39
Radiology/Pathology	3,041.5	17.55	4.45	3,350.7	16.55	4.62	3,328.5	17.53	4.86	3,409.7	16.92	4.81	3,568.6	17.40	5.17	3,452.1	17.19	4.95
Outpatient Behavioral Health	4,204.4	44.48	15.58	4,314.0	43.42	15.61	4,496.7	45.43	17.02	4,414.0	44.78	16.47	4,272.4	43.71	15.56	4,054.2	43.50	14.69
Clinic Visit	317.1	63.41	1.68	246.0	85.88	1.76	508.4	81.08	3.44	422.0	97.27	3.42	593.3	76.68	3.79	537.5	81.48	3.65
Other Professional	5,816.6	20.03	9.71	5,825.8	20.03	9.72	8,200.9	17.72	12.11	7,934.3	17.72	11.72	7,268.1	19.91	12.06	6,929.6	19.91	11.50
<b>Total PMPM</b>			\$269.70			\$307.52			\$315.64			\$330.42			\$305.67			\$296.93
<b>Member Months</b>			12,073			12,073			11,259			11,259			8,252			8,252
<b>Morbidity Adjustment</b>						1.075						1.080						1.077

State of Indiana  
Office of Medicaid Policy & Planning  
Calendar Year 2007 Capitation Rates  
Base PCCM Claims Experience

4/25/2006  
8:12 AM

Population: Adult Males MAU  
Package: AB

Category of Service	State Fiscal Year 2003 Claims Experience						State Fiscal Year 2004 Claims Experience						State Fiscal Year 2005 Claims Experience					
	Actual			Trended & Completed			Actual			Trended & Completed			Actual			Trended & Completed		
	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM
<b>Inpatient Hospital</b>																		
Medical/Surgical	718.4	\$1,645.98	\$98.55	590.8	\$1,711.03	84.24	531.7	\$1,358.91	\$60.21	452.3	\$1,390.88	52.43	605.2	\$1,201.78	\$60.61	537.2	\$1,211.13	54.22
Well Newborn	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00
Behavioral Health	149.0	489.24	6.08	153.3	466.27	5.96	120.8	482.64	4.86	117.6	468.91	4.60	83.4	419.49	2.91	77.5	415.48	2.68
Other Inpatient	-	0.00	(0.30)	-	0.00	(0.26)	14.5	765.64	0.93	12.3	783.65	0.81	67.9	1,992.42	11.28	60.3	2,007.92	10.09
<b>Outpatient Hospital</b>																		
Emergency Room	1,588.1	\$79.19	\$10.48	1,576.2	\$81.12	10.66	1,650.8	\$74.53	\$10.25	1,572.0	\$75.61	9.91	1,633.6	\$73.60	\$10.02	1,504.2	\$73.95	9.27
Other Outpatient	12,885.3	42.19	45.30	12,788.5	43.22	46.06	11,942.0	43.23	43.03	11,372.3	43.86	41.57	13,219.8	40.32	44.42	12,172.7	40.51	41.10
<b>Pharmacy</b>																		
Prescription/OTC Drugs	37,483.6	\$52.92	\$165.30	34,996.1	\$56.94	166.04	38,083.4	\$58.42	\$185.41	34,960.5	\$61.04	177.84	33,155.9	\$68.04	\$188.00	30,074.9	\$69.05	173.05
<b>Ancillaries</b>																		
Transportation	15,425.4	\$4.19	\$5.39	15,309.5	\$5.11	6.51	21,187.9	\$3.14	\$5.54	20,177.1	\$3.53	5.94	28,144.1	\$4.01	\$9.42	26,073.1	\$4.18	9.07
Ancillary	19,776.1	10.71	17.65	21,831.1	11.21	20.40	49,746.0	3.95	16.38	50,495.6	4.06	17.09	48,568.2	6.73	27.24	45,883.7	6.79	25.97
<b>Physician</b>																		
Surgery	3,572.2	\$60.93	\$18.14	3,335.1	\$60.93	16.93	1,247.1	\$117.81	\$12.24	1,144.9	\$117.81	11.24	1,182.7	\$169.31	\$16.69	1,088.2	\$169.31	15.35
Office Visits/Consults	5,883.2	30.92	15.16	5,492.8	30.92	14.16	6,117.5	28.94	14.75	5,615.8	28.94	13.54	5,793.1	29.52	14.25	5,330.1	29.52	13.11
Well Baby/Physical Exams	22.2	36.23	0.07	20.8	36.23	0.06	21.8	33.12	0.06	20.0	33.12	0.06	21.6	29.85	0.05	19.9	29.85	0.05
Hospital Inpatient Visits	3,307.5	16.24	4.48	3,088.0	16.24	4.18	952.3	49.51	3.93	874.2	49.51	3.61	975.8	53.41	4.34	897.8	53.41	4.00
Emergency Room Visits	1,743.8	50.44	7.33	1,628.1	50.44	6.84	1,701.5	50.66	7.18	1,562.0	50.66	6.59	1,642.8	53.14	7.27	1,511.5	53.14	6.69
Radiology/Pathology	5,691.9	24.67	11.70	6,503.8	26.10	14.15	5,674.9	23.48	11.10	5,880.9	24.28	11.90	5,132.3	26.82	11.47	4,881.8	27.13	11.04
Outpatient Behavioral Health	1,886.2	49.19	7.73	1,940.6	46.88	7.58	1,484.0	50.80	6.28	1,444.0	49.36	5.94	1,170.4	49.00	4.78	1,088.0	48.53	4.40
Clinic Visit	569.4	64.28	3.05	518.6	72.62	3.14	797.6	76.24	5.07	721.3	82.03	4.93	843.0	74.24	5.22	771.8	76.08	4.89
Other Professional	10,714.4	19.59	17.49	10,505.9	19.59	17.15	13,355.9	17.80	19.82	12,626.7	17.80	18.73	9,143.6	20.05	15.28	8,495.7	20.05	14.20
<b>Total PMPM</b>			\$433.58			\$423.80			\$407.04			\$386.71			\$433.26			\$399.17
<b>Member Months</b>			5,395			5,395			4,965			4,965			3,886			3,886
<b>Morbidity Adjustment</b>						1.098						1.106						1.108

State of Indiana  
Office of Medicaid Policy & Planning  
Calendar Year 2007 Capitation Rates  
Base PCCM Claims Experience

4/25/2006  
8:12 AM

Population: Adult Females MAU  
Package: AB

Category of Service	State Fiscal Year 2003 Claims Experience						State Fiscal Year 2004 Claims Experience						State Fiscal Year 2005 Claims Experience					
	Actual			Trended & Completed			Actual			Trended & Completed			Actual			Trended & Completed		
	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM
<b>Inpatient Hospital</b>																		
Medical/Surgical	895.0	\$1,069.15	\$79.74	736.0	\$1,111.40	68.17	792.4	\$1,098.61	\$72.55	674.1	\$1,124.46	63.17	628.3	\$1,026.95	\$53.77	557.7	\$1,034.94	48.10
Well Newborn	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00
Behavioral Health	281.6	506.65	11.89	289.7	482.87	11.66	308.9	475.79	12.25	300.6	462.26	11.58	263.7	414.24	9.10	244.9	410.28	8.37
Other Inpatient	1.7	1,182.15	0.17	1.4	1,228.87	0.14	23.4	1,353.44	2.64	19.9	1,385.29	2.30	45.4	1,349.52	5.11	40.3	1,360.03	4.57
<b>Outpatient Hospital</b>																		
Emergency Room	1,867.7	\$75.20	\$11.70	1,853.7	\$77.03	11.90	1,915.8	\$75.01	\$11.97	1,824.4	\$76.10	11.57	2,100.5	\$71.32	\$12.48	1,934.2	\$71.66	11.55
Other Outpatient	17,426.3	41.54	60.32	17,295.4	42.55	61.32	17,492.2	40.64	59.24	16,657.7	41.23	57.24	19,988.0	37.06	61.72	18,404.9	37.23	57.11
<b>Pharmacy</b>																		
Prescription/OTC Drugs	45,626.5	\$54.02	\$205.39	42,598.6	\$58.12	206.32	49,419.1	\$59.16	\$243.63	45,366.7	\$61.81	233.69	44,143.2	\$61.24	\$225.27	40,041.2	\$62.14	207.35
<b>Ancillaries</b>																		
Transportation	50,857.1	\$2.49	\$10.55	50,475.1	\$3.03	12.75	63,604.0	\$2.21	\$11.73	60,569.7	\$2.49	12.58	78,505.0	\$2.17	\$14.21	72,728.0	\$2.26	13.70
Ancillary	30,701.7	7.35	18.81	33,891.9	7.70	21.74	58,254.5	4.00	19.41	59,132.4	4.11	20.26	49,823.0	4.53	18.79	47,069.1	4.57	17.92
<b>Physician</b>																		
Surgery	4,668.0	\$51.34	\$19.97	4,358.2	\$51.34	18.65	2,213.4	\$96.74	\$17.84	2,031.9	\$96.74	16.38	1,467.5	\$140.68	\$17.20	1,350.2	\$140.68	15.83
Office Visits/Consults	7,555.7	31.12	19.59	7,054.3	31.12	18.29	7,890.6	29.48	19.38	7,243.6	29.48	17.79	7,921.6	29.86	19.71	7,288.5	29.86	18.14
Well Baby/Physical Exams	163.4	33.56	0.46	152.5	33.56	0.43	179.7	30.80	0.46	165.0	30.80	0.42	160.6	32.00	0.43	147.8	32.00	0.39
Hospital Inpatient Visits	1,641.9	43.75	5.99	1,532.9	43.75	5.59	1,435.5	48.19	5.76	1,317.8	48.19	5.29	1,296.0	50.17	5.42	1,192.4	50.17	4.98
Emergency Room Visits	1,972.0	51.29	8.43	1,841.1	51.29	7.87	1,987.9	50.43	8.35	1,824.9	50.43	7.67	2,015.1	54.26	9.11	1,854.1	54.26	8.38
Radiology/Pathology	7,897.7	22.15	14.58	9,024.2	23.44	17.63	8,596.8	21.87	15.67	8,908.7	22.62	16.79	8,693.7	23.30	16.88	8,269.5	23.56	16.24
Outpatient Behavioral Health	3,764.6	45.88	14.39	3,873.1	43.72	14.11	4,054.4	46.59	15.74	3,945.2	45.26	14.88	4,645.2	38.53	14.92	4,318.3	38.16	13.73
Clinic Visit	634.5	65.81	3.48	577.9	74.35	3.58	900.5	83.49	6.27	814.4	89.83	6.10	1,014.0	83.45	7.05	928.3	85.51	6.62
Other Professional	12,269.3	20.77	21.23	12,030.7	20.77	20.82	14,489.3	17.63	21.29	13,698.2	17.63	20.13	15,904.9	19.26	25.53	14,778.0	19.26	23.72
<b>Total PMPM</b>			\$506.69			\$500.96			\$544.20			\$517.83			\$516.72			\$476.70
<b>Member Months</b>			28,424			28,424			25,638			25,638			17,704			17,704
<b>Morbidity Adjustment</b>						1.098						1.106						1.108

State of Indiana  
Office of Medicaid Policy & Planning  
Calendar Year 2007 Capitation Rates  
Base PCCM Claims Experience

4/25/2006  
8:12 AM

Population: Maternity MAU  
Package: AB

Category of Service	State Fiscal Year 2003 Claims Experience						State Fiscal Year 2004 Claims Experience						State Fiscal Year 2005 Claims Experience					
	Actual			Trended & Completed			Actual			Trended & Completed			Actual			Trended & Completed		
	Util Per Delivery	Cost Per Service	Cost Per Delivery	Util Per Delivery	Cost Per Service	Cost Per Delivery	Util Per Delivery	Cost Per Service	Cost Per Delivery	Util Per Delivery	Cost Per Service	Cost Per Delivery	Util Per Delivery	Cost Per Service	Cost Per Delivery	Util Per Delivery	Cost Per Service	Cost Per Delivery
<i>Inpatient Hospital</i>																		
Maternity Delivery	2.3	\$966.41	\$2,185.30	2.3	\$1,053.20	2,381.56	2.4	\$968.35	\$2,314.59	2.4	\$1,019.63	2,437.16	2.5	\$934.42	\$2,310.80	2.5	\$950.63	2,350.89
<i>Physician</i>																		
Normal Deliveries	0.7	\$648.68	\$473.36	0.7	\$698.43	509.67	0.6	\$661.56	\$427.60	0.6	\$691.56	446.98	0.6	\$671.50	\$426.49	0.6	\$681.50	432.84
Cesarean Deliveries	0.3	677.29	225.76	0.3	729.24	243.08	0.4	702.63	257.06	0.4	734.49	268.72	0.3	744.04	251.36	0.3	755.12	255.11
Non-Deliveries	8.7	32.38	281.81	8.7	34.87	303.43	11.0	30.66	336.15	11.0	32.05	351.39	11.9	31.36	373.29	11.9	31.82	378.85
<b>Total Cost Per Delivery</b>		\$3,166.24				\$3,437.73			\$3,335.40			\$3,504.25			\$3,361.95			\$3,417.69
<b>Deliveries</b>			111			111			82			82			74			74
<b>Morbidity Adjustment</b>						1.000						1.000						1.000





**CONFIDENTIAL - FOR INTERNAL DISCUSSIONS ONLY**

## **ATTACHMENT 2**

State of Indiana  
Office of Medicaid Policy & Planning  
Calendar Year 2007 Capitation Rates  
Composite Base Claims Experience

Category of Service	Statewide: Package A/B						Statewide: Package C						Statewide: Package A/B MAU					
	Newborns			Newborns			Newborns			Newborns			Newborns			Newborns		
	PCCM Base Rate			Health Plans Base Rate			PCCM Base Rate			Health Plans Base Rate			PCCM Base Rate			Health Plans Base Rate		
	Util Rate Per 1,000	Cost Per Service	PMPM	Util Rate Per 1,000	Cost Per Service	PMPM	Util Rate Per 1,000	Cost Per Service	PMPM	Util Rate Per 1,000	Cost Per Service	PMPM	Util Rate Per 1,000	Cost Per Service	PMPM	Util Rate Per 1,000	Cost Per Service	PMPM
<b>Inpatient Hospital</b>																		
Medical/Surgical	1,880.7	\$695.53	\$109.01	1,006.3	\$750.88	\$62.97	1,033.1	\$673.55	\$57.99	103.5	\$980.76	\$8.46	6,240.9	\$796.08	\$414.02	5,804.9	\$859.58	\$415.81
Well Newborn	1,902.1	383.45	60.78	1,164.1	390.60	37.89	515.4	366.20	15.73	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00
Behavioral Health	0.1	289.53	0.00	NA	NA	NA	-	0.00	0.00	NA	NA	NA	-	0.00	0.00	NA	NA	NA
Other Inpatient	35.0	549.80	1.60	9.5	511.29	0.40	77.7	348.38	2.25	-	0.00	0.00	100.3	183.10	1.53	-	0.00	0.00
<b>Outpatient Hospital</b>																		
Emergency Room	1,172.1	\$74.78	\$7.30	969.1	\$52.94	\$4.28	672.0	\$76.78	\$4.30	529.7	\$54.32	\$2.40	2,178.0	\$56.19	\$10.20	793.5	\$48.07	\$3.18
Other Outpatient	5,210.1	33.30	14.46	3,556.6	58.08	17.21	4,273.1	41.53	14.79	3,020.3	55.64	14.00	33,699.0	26.15	73.43	10,070.1	62.11	52.13
<b>Pharmacy</b>																		
Prescription Drugs/OTC Drugs	6,761.5	\$36.04	\$20.31	4,568.4	\$29.45	\$11.21	4,619.6	\$43.11	\$16.60	4,255.6	\$49.17	\$17.44	8,928.9	\$94.89	\$70.61	12,831.8	\$46.38	\$49.59
<b>Ancillaries</b>																		
Transportation	4,347.0	\$5.87	\$2.13	310.9	\$27.04	\$0.70	1,772.1	\$24.18	\$3.57	-	\$0.00	\$0.00	61,686.9	\$3.57	\$18.33	5,089.8	\$0.00	\$0.00
DME, Home Health, Other Anc	8,312.0	15.09	10.45	8,462.2	8.29	5.85	4,545.2	36.38	13.78	3,670.8	12.04	3.68	74,188.6	19.16	118.47	52,615.7	18.55	81.32
<b>Physician</b>																		
Inpatient and Outpatient Surgery	1,202.4	\$61.17	\$6.13	781.2	\$91.50	\$5.96	898.6	\$59.90	\$4.49	421.4	\$144.21	\$5.06	5,170.4	\$63.07	\$27.17	1,664.9	\$232.35	\$32.24
Office Visits/Consults	5,275.5	26.46	11.63	4,419.4	29.86	11.00	5,168.8	29.41	12.67	4,690.9	28.83	11.27	5,829.0	44.34	21.54	8,441.6	40.90	28.77
Well Baby Exams/Phys Exams	3,635.8	33.47	10.14	3,325.3	36.70	10.17	3,371.1	35.80	10.06	2,737.5	38.28	8.73	1,273.8	33.02	3.50	1,921.6	36.41	5.83
Hospital Inpatient Visits	4,030.8	62.52	21.00	2,691.4	76.60	17.18	1,761.3	85.38	12.53	358.8	54.06	1.62	6,401.7	69.44	37.04	7,025.4	49.71	29.10
Emergency Room Visits	1,139.3	44.09	4.19	1,087.9	38.95	3.53	574.7	44.93	2.15	461.0	45.45	1.75	1,256.3	65.55	6.86	1,473.6	65.41	8.03
Radiology/Pathology	2,141.9	12.38	2.21	2,091.6	11.82	2.06	2,179.4	13.19	2.40	1,135.9	11.50	1.09	7,449.3	14.60	9.06	7,105.4	15.79	9.35
Outpatient Behavioral Health	7.6	64.64	0.04	NA	NA	NA	-	0.00	0.00	NA	NA	NA	-	0.00	0.00	NA	NA	NA
Clinic Visit	1,197.4	87.52	8.73	-	0.00	0.00	1,021.9	78.98	6.73	-	0.00	0.00	1,968.6	230.66	37.84	-	0.00	0.00
Other Professional	9,653.4	17.75	14.28	8,430.8	11.58	8.13	8,685.2	19.80	14.33	6,136.9	13.58	6.94	10,125.2	104.88	88.49	16,440.1	76.18	104.36
<b>Total PMPM</b>			\$304.40			\$198.54			\$194.36			\$82.45			\$938.11			\$819.71
<b>Base Period Member Months</b>			799,065			787,817			5,417			2,933			235			245
<b>Morbidity Adjustment</b>			1.043			0.955			1.000			1.000			1.043			0.955

State of Indiana  
Office of Medicaid Policy & Planning  
Calendar Year 2007 Capitation Rates  
Composite Base Claims Experience

Category of Service	Statewide: Package A\B						Statewide: Package C						Statewide: Package A\B MAU					
	Preschoolers			Preschoolers			Preschoolers			Preschoolers			Preschoolers			Preschoolers		
	PCCM Base Rate			Health Plans Base Rate			PCCM Base Rate			Health Plans Base Rate			PCCM Base Rate			Health Plans Base Rate		
	Util Rate	Cost		Util Rate	Cost		Util Rate	Cost		Util Rate	Cost		Util Rate	Cost		Util Rate	Cost	
	Per 1,000	Per Service	PMPM	Per 1,000	Per Service	PMPM	Per 1,000	Per Service	PMPM	Per 1,000	Per Service	PMPM	Per 1,000	Per Service	PMPM	Per 1,000	Per Service	PMPM
<b>Inpatient Hospital</b>																		
Medical/Surgical	84.7	\$987.37	\$6.97	69.6	\$774.96	\$4.49	63.5	\$825.17	\$4.37	54.2	\$776.25	\$3.50	789.4	\$1,086.77	\$71.49	884.2	\$853.09	\$62.86
Well Newborn	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00
Behavioral Health	14.9	461.87	0.57	NA	NA	NA	2.8	157.70	0.04	NA	NA	NA	188.9	471.48	7.42	NA	NA	NA
Other Inpatient	2.4	548.22	0.11	2.2	356.37	0.07	6.5	554.17	0.30	4.2	255.00	0.09	5.5	1,190.99	0.55	10.2	186.35	0.16
<b>Outpatient Hospital</b>																		
Emergency Room	845.0	\$75.72	\$5.33	616.3	\$53.56	\$2.75	673.0	\$77.33	\$4.34	505.0	\$53.33	\$2.24	1,426.3	\$75.78	\$9.01	886.0	\$52.18	\$3.85
Other Outpatient	2,918.6	44.19	10.75	2,064.2	56.07	9.64	3,524.5	51.10	15.01	2,384.4	63.65	12.65	15,897.1	51.48	68.20	9,044.8	59.85	45.11
<b>Pharmacy</b>																		
Prescription Drugs/OTC Drugs	6,271.6	\$37.97	\$19.85	3,496.9	\$31.84	\$9.28	6,472.1	\$45.84	\$24.72	4,030.2	\$35.17	\$11.81	17,152.6	\$66.86	\$95.57	8,528.1	\$61.37	\$43.61
<b>Ancillaries</b>																		
Transportation	3,903.2	\$3.22	\$1.05	102.0	\$30.42	\$0.26	368.6	\$14.81	\$0.45	92.0	\$14.23	\$0.11	72,524.2	\$1.82	\$10.98	932.9	\$17.73	\$1.38
DME, Home Health, Other Anc	6,029.1	5.27	2.65	3,727.1	5.71	1.77	9,190.1	4.62	3.54	5,492.1	4.46	2.04	278,458.9	3.05	70.86	148,349.8	4.12	50.93
<b>Physician</b>																		
Inpatient and Outpatient Surgery	684.1	\$56.43	\$3.22	431.0	\$70.72	\$2.54	816.5	\$61.89	\$4.21	478.5	\$81.25	\$3.24	3,002.8	\$89.82	\$22.48	2,429.2	\$83.15	\$16.83
Office Visits/Consults	3,486.9	25.82	7.50	2,621.9	29.29	6.40	4,427.9	27.55	10.17	3,517.6	29.83	8.74	6,087.2	30.45	15.44	4,617.7	34.36	13.22
Well Baby Exams/Phys Exams	802.8	33.33	2.23	849.1	35.90	2.54	896.6	35.55	2.66	955.9	37.64	3.00	684.9	32.90	1.88	743.5	35.12	2.18
Hospital Inpatient Visits	174.7	57.03	0.83	134.9	55.26	0.62	126.1	63.02	0.66	95.2	65.54	0.52	1,249.5	53.31	5.55	1,356.8	53.92	6.10
Emergency Room Visits	783.4	41.07	2.68	643.6	36.50	1.96	566.1	42.87	2.02	398.4	43.77	1.45	1,373.6	46.47	5.32	1,648.1	32.66	4.49
Radiology/Pathology	1,445.6	11.76	1.42	1,102.7	11.46	1.05	1,816.7	12.84	1.94	1,326.0	12.57	1.39	4,011.1	14.33	4.79	3,119.2	16.00	4.16
Outpatient Behavioral Health	285.4	49.90	1.19	NA	NA	NA	245.9	49.96	1.02	NA	NA	NA	1,212.9	53.69	5.43	NA	NA	NA
Clinic Visit	435.6	72.69	2.64	-	0.00	0.00	390.3	77.88	2.53	-	0.00	0.00	603.1	139.37	7.00	-	0.00	0.00
Other Professional	4,318.0	12.38	4.46	5,206.0	7.18	3.12	5,163.4	12.26	5.28	28,105.5	5.45	12.76	13,299.9	25.01	27.72	17,029.6	10.73	15.23
<b>Total PMPM</b>			\$73.43			\$46.49			\$83.26			\$63.55			\$429.68			\$270.10
<b>Base Period Member Months</b>			1,946,223			2,622,917			65,202			73,032			21,019			37,659
<b>Morbidity Adjustment</b>			1.078			0.938			1.059			0.937			1.078			0.938

State of Indiana  
Office of Medicaid Policy & Planning  
Calendar Year 2007 Capitation Rates  
Composite Base Claims Experience

Category of Service	Statewide: Package A\B						Statewide: Package C						Statewide: Package A\B MAU					
	Children			Children			Children			Children			Children			Children		
	PCCM Base Rate			Health Plans Base Rate			PCCM Base Rate			Health Plans Base Rate			PCCM Base Rate			Health Plans Base Rate		
	Util Rate Per 1,000	Cost Per Service	PMPM	Util Rate Per 1,000	Cost Per Service	PMPM	Util Rate Per 1,000	Cost Per Service	PMPM	Util Rate Per 1,000	Cost Per Service	PMPM	Util Rate Per 1,000	Cost Per Service	PMPM	Util Rate Per 1,000	Cost Per Service	PMPM
<b>Inpatient Hospital</b>																		
Medical/Surgical	39.3	\$1,089.37	\$3.57	32.9	\$810.90	\$2.23	45.0	\$1,129.51	\$4.24	32.2	\$988.34	\$2.65	225.1	\$1,130.26	\$21.21	241.2	\$874.72	\$17.58
Well Newborn	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00
Behavioral Health	128.3	455.52	4.87	NA	NA	NA	28.0	515.88	1.20	NA	NA	NA	1,050.4	470.34	41.17	NA	NA	NA
Other Inpatient	1.0	795.15	0.06	0.4	498.34	0.02	0.4	226.13	0.01	0.3	154.31	0.00	3.4	718.00	0.20	3.1	996.38	0.26
<b>Outpatient Hospital</b>																		
Emergency Room	462.5	\$76.75	\$2.96	319.7	\$54.83	\$1.46	394.0	\$79.02	\$2.59	292.4	\$54.33	\$1.32	742.8	\$76.89	\$4.76	482.6	\$53.17	\$2.14
Other Outpatient	2,065.0	42.10	7.24	1,294.4	59.70	6.44	2,806.8	44.61	10.43	1,787.1	60.27	8.98	7,227.1	40.77	24.55	4,029.0	59.84	20.09
<b>Pharmacy</b>																		
Prescription Drugs/OTC Drugs	7,089.4	\$60.19	\$35.56	3,357.6	\$52.40	\$14.66	6,926.8	\$70.64	\$40.78	4,419.9	\$56.55	\$20.83	20,238.7	\$91.77	\$154.78	9,735.7	\$82.50	\$66.93
<b>Ancillaries</b>																		
Transportation	5,627.6	\$2.43	\$1.14	59.7	\$27.73	\$0.14	494.4	\$6.23	\$0.26	37.1	\$16.99	\$0.05	38,116.6	\$2.37	\$7.52	334.2	\$19.59	\$0.55
DME, Home Health, Other Anc	6,324.9	3.27	1.73	2,622.6	4.57	1.00	9,526.0	3.01	2.39	4,101.9	4.31	1.47	123,226.3	2.31	23.72	71,004.5	3.11	18.43
<b>Physician</b>																		
Inpatient and Outpatient Surgery	486.7	\$58.04	\$2.35	275.0	\$75.76	\$1.74	603.3	\$64.99	\$3.27	387.7	\$75.07	\$2.43	964.5	\$78.52	\$6.31	705.9	\$107.16	\$6.30
Office Visits/Consults	2,465.1	26.23	5.39	1,722.9	30.81	4.42	3,142.9	28.46	7.46	2,429.0	31.99	6.48	3,904.6	29.22	9.51	2,584.9	33.45	7.21
Well Baby Exams/Phys Exams	230.4	32.87	0.63	268.4	36.18	0.81	306.1	35.37	0.90	365.6	37.47	1.14	256.1	33.61	0.72	296.3	35.37	0.87
Hospital Inpatient Visits	188.7	45.78	0.72	56.5	57.07	0.27	107.7	55.03	0.49	40.1	64.41	0.22	1,297.3	43.80	4.74	405.0	55.29	1.87
Emergency Room Visits	413.9	41.18	1.42	355.5	34.33	1.02	333.3	43.88	1.22	224.4	44.91	0.84	700.6	44.14	2.58	458.0	47.61	1.82
Radiology/Pathology	1,342.5	13.20	1.48	890.3	13.43	1.00	1,772.5	15.58	2.30	1,336.5	14.36	1.60	2,349.9	14.47	2.83	1,620.5	17.37	2.35
Outpatient Behavioral Health	1,935.7	37.85	6.11	NA	NA	NA	1,523.4	49.04	6.23	NA	NA	NA	4,849.3	44.52	17.99	NA	NA	NA
Clinic Visit	263.4	80.81	1.77	-	0.00	0.00	283.4	76.99	1.82	-	0.00	0.00	369.5	85.60	2.64	-	0.00	0.00
Other Professional	4,413.2	16.16	5.94	7,194.8	7.28	4.37	6,746.2	15.06	8.47	4,431.7	16.72	6.17	8,417.8	16.89	11.85	51,648.4	6.69	28.80
<b>Total PMPM</b>			\$82.95			\$39.56			\$94.05			\$54.18			\$337.08			\$175.19
<b>Base Period Member Months</b>			2,155,281			2,756,218			86,485			88,427			46,253			78,120
<b>Morbidity Adjustment</b>			1.078			0.938			1.059			0.937			1.078			0.938

State of Indiana  
Office of Medicaid Policy & Planning  
Calendar Year 2007 Capitation Rates  
Composite Base Claims Experience

Category of Service	Statewide: Package A/B						Statewide: Package C						Statewide: Package A\B MAU					
	Adolescents			Adolescents			Adolescents			Adolescents			Adolescents			Adolescents		
	PCCM Base Rate			Health Plans Base Rate			PCCM Base Rate			Health Plans Base Rate			PCCM Base Rate			Health Plans Base Rate		
	Util Rate	Cost		Util Rate	Cost		Util Rate	Cost		Util Rate	Cost		Util Rate	Cost		Util Rate	Cost	
	Per 1,000	Per Service	PMPM	Per 1,000	Per Service	PMPM	Per 1,000	Per Service	PMPM	Per 1,000	Per Service	PMPM	Per 1,000	Per Service	PMPM	Per 1,000	Per Service	PMPM
<b>Inpatient Hospital</b>																		
Medical/Surgical	90.9	\$1,027.99	\$7.79	84.1	\$839.28	\$5.89	59.6	\$1,270.14	\$6.31	81.0	\$745.91	\$5.03	246.6	\$1,168.75	\$24.02	348.7	\$648.10	\$18.83
Well Newborn	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00
Behavioral Health	202.1	443.30	7.47	NA	NA	NA	79.3	488.34	3.23	NA	NA	NA	744.4	440.04	27.30	NA	NA	NA
Other Inpatient	0.9	1,032.80	0.08	1.3	382.12	0.04	0.4	399.53	0.01	-	0.00	0.00	1.6	1,246.35	0.17	6.2	474.11	0.24
<b>Outpatient Hospital</b>																		
Emergency Room	759.4	\$75.52	\$4.78	518.1	\$51.49	\$2.22	524.7	\$77.81	\$3.40	362.0	\$53.69	\$1.62	1,035.9	\$76.08	\$6.57	657.4	\$51.52	\$2.82
Other Outpatient	5,609.0	34.35	16.06	3,627.1	53.58	16.20	4,292.9	38.34	13.72	2,829.5	57.87	13.65	7,628.7	35.30	22.44	4,675.4	62.15	24.21
<b>Pharmacy</b>																		
Prescription Drugs/OTC Drugs	9,338.6	\$52.08	\$40.53	4,412.4	\$46.20	\$16.99	8,820.9	\$71.02	\$52.20	4,852.5	\$58.66	\$23.72	19,847.8	\$92.21	\$152.51	8,414.9	\$83.18	\$58.33
<b>Ancillaries</b>																		
Transportation	6,662.1	\$3.27	\$1.82	215.4	\$22.41	\$0.40	1,120.5	\$12.39	\$1.16	94.8	\$45.92	\$0.36	42,311.6	\$2.02	\$7.11	379.7	\$38.05	\$1.20
DME, Home Health, Other Anc	5,658.7	4.43	2.09	2,726.7	5.89	1.34	10,471.0	3.28	2.87	6,753.1	5.16	2.91	57,099.1	3.08	14.65	44,108.1	3.29	12.09
<b>Physician</b>																		
Inpatient and Outpatient Surgery	1,118.4	\$61.25	\$5.71	614.1	\$86.81	\$4.44	699.7	\$81.76	\$4.77	416.7	\$97.96	\$3.40	1,110.3	\$80.45	\$7.44	695.1	\$98.34	\$5.70
Office Visits/Consults	2,856.8	27.19	6.47	2,014.1	31.50	5.29	3,441.8	28.70	8.23	2,443.5	31.91	6.50	3,806.9	28.98	9.19	2,438.2	32.84	6.67
Well Baby Exams/Phys Exams	215.8	30.25	0.54	224.9	33.93	0.64	295.0	31.77	0.78	341.7	34.44	0.98	214.5	30.44	0.54	220.2	33.94	0.62
Hospital Inpatient Visits	437.7	47.65	1.74	177.3	60.27	0.89	190.7	54.54	0.87	114.1	61.49	0.58	978.0	46.44	3.79	543.9	54.92	2.49
Emergency Room Visits	701.5	46.27	2.70	539.4	42.92	1.93	515.4	42.95	1.84	298.8	48.90	1.22	968.4	47.49	3.83	640.9	49.99	2.67
Radiology/Pathology	3,759.8	16.53	5.18	3,109.2	16.14	4.18	2,571.8	19.07	4.09	2,020.3	18.12	3.05	3,404.2	16.89	4.79	2,842.2	17.63	4.18
Outpatient Behavioral Health	1,521.0	41.44	5.25	NA	NA	NA	1,808.7	45.83	6.91	NA	NA	NA	4,260.7	43.90	15.59	NA	NA	NA
Clinic Visit	405.5	78.23	2.64	-	0.00	0.00	415.5	74.46	2.58	-	0.00	0.00	401.8	88.21	2.95	-	0.00	0.00
Other Professional	6,656.7	15.79	8.76	9,786.0	9.65	7.87	6,512.1	17.23	9.35	5,093.5	25.08	10.65	6,896.6	19.22	11.05	24,492.9	11.01	22.48
<b>Total PMPM</b>			\$119.61			\$68.31			\$122.31			\$73.67			\$313.93			\$162.54
<b>Base Period Member Months</b>			1,452,414			1,850,956			54,882			55,026			31,584			55,490
<b>Morbidity Adjustment</b>			1.078			0.938			1.059			0.937			1.078			0.938

State of Indiana  
Office of Medicaid Policy & Planning  
Calendar Year 2007 Capitation Rates  
Composite Base Claims Experience

<u>Category of Service</u>	Statewide: Package A\B						Statewide: Package A\B MAU					
	Adult Males			Adult Males			Adult Males			Adult Males		
	PCCM Base Rate			Health Plans Base Rate			PCCM Base Rate			Health Plans Base Rate		
	Cost			Cost			Cost			Cost		
	<u>Util Rate</u> <u>Per 1,000</u>	<u>Per</u> <u>Service</u>	<u>PMPM</u>	<u>Util Rate</u> <u>Per 1,000</u>	<u>Per</u> <u>Service</u>	<u>PMPM</u>	<u>Util Rate</u> <u>Per 1,000</u>	<u>Per</u> <u>Service</u>	<u>PMPM</u>	<u>Util Rate</u> <u>Per 1,000</u>	<u>Per</u> <u>Service</u>	<u>PMPM</u>
<i>Inpatient Hospital</i>												
Medical/Surgical	265.9	\$1,568.15	\$34.75	209.7	\$929.13	\$16.24	526.8	\$1,437.68	\$63.11	868.2	\$750.73	\$54.31
Well Newborn	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00
Behavioral Health	120.2	510.39	5.11	NA	NA	NA	116.1	450.22	4.36	NA	NA	NA
Other Inpatient	4.4	1,308.52	0.48	3.6	1,049.47	0.31	24.2	0.00	0.00	11.5	966.15	0.93
<i>Outpatient Hospital</i>												
Emergency Room	1,300.3	\$76.20	\$8.26	855.7	\$55.38	\$3.95	1,550.8	\$76.89	\$9.94	1,277.7	\$50.72	\$5.40
Other Outpatient	8,931.5	51.45	38.30	4,465.3	77.88	28.98	12,111.1	42.53	42.93	7,833.5	66.50	43.41
<i>Pharmacy</i>												
Prescription Drugs/OTC Drugs	18,440.1	\$56.56	\$86.91	10,036.2	\$45.09	\$37.71	33,343.8	\$62.34	\$173.23	22,922.6	\$51.28	\$97.96
<i>Ancillaries</i>												
Transportation	12,409.9	\$3.81	\$3.94	268.2	\$24.03	\$0.54	20,519.9	\$4.27	\$7.30	950.8	\$27.41	\$2.17
DME, Home Health, Other Anc	15,888.0	7.25	9.60	3,178.7	17.65	4.67	39,403.5	7.35	24.15	55,079.1	7.36	33.76
<i>Physician</i>												
Inpatient and Outpatient Surgery	1,745.1	\$110.29	\$16.04	1,020.4	\$119.96	\$10.20	1,856.1	\$116.01	\$17.94	1,274.4	\$121.60	\$12.91
Office Visits/Consults	4,239.7	30.82	10.89	2,881.9	34.94	8.39	5,479.6	29.79	13.60	4,571.2	34.81	13.26
Well Baby Exams/Phys Exams	30.0	34.20	0.09	34.4	40.42	0.12	20.2	33.07	0.06	23.9	40.99	0.08
Hospital Inpatient Visits	516.5	50.21	2.16	411.6	49.00	1.68	1,620.0	39.72	5.36	1,416.7	49.97	5.90
Emergency Room Visits	1,261.9	48.34	5.08	814.9	49.32	3.35	1,567.2	51.41	6.71	1,354.9	56.20	6.34
Radiology/Pathology	4,394.9	27.44	10.05	3,038.3	27.17	6.88	5,755.5	25.84	12.39	4,772.2	25.68	10.21
Outpatient Behavioral Health	1,196.9	41.77	4.17	NA	NA	NA	1,490.9	48.26	6.00	NA	NA	NA
Clinic Visit	476.0	82.72	3.28	-	0.00	0.00	670.6	76.91	4.30	-	0.00	0.00
Other Professional	9,708.5	19.32	15.63	18,366.3	12.58	19.26	10,542.8	19.15	16.82	11,921.5	17.69	17.58
<b>Total PMPM</b>		\$254.74			\$142.28			\$408.20			\$304.24	
<b>Base Period Member Months</b>		138,288			154,929			14,246			11,278	
<b>Morbidity Adjustment</b>		1.104			0.927			1.104			0.927	

State of Indiana  
Office of Medicaid Policy & Planning  
Calendar Year 2007 Capitation Rates  
Composite Base Claims Experience

Category of Service	Statewide: Package A\B						Statewide: Package A\B MAU					
	Adult Females			Adult Females			Adult Females			Adult Females		
	PCCM Base Rate			Health Plans Base Rate			PCCM Base Rate			Health Plans Base Rate		
	Cost			Cost			Cost			Cost		
	Util Rate Per 1,000	Per Service	PMPM	Util Rate Per 1,000	Per Service	PMPM	Util Rate Per 1,000	Per Service	PMPM	Util Rate Per 1,000	Per Service	PMPM
<b>Inpatient Hospital</b>												
Medical/Surgical	266.1	\$1,141.66	\$25.31	230.6	\$780.67	\$15.00	655.9	\$1,090.27	\$59.59	859.6	\$778.12	\$55.74
Well Newborn	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00	-	0.00	0.00
Behavioral Health	80.3	489.66	3.28	NA	NA	NA	278.4	451.80	10.48	NA	NA	NA
Other Inpatient	5.2	685.30	0.30	4.3	453.34	0.16	20.5	1,324.73	2.27	15.8	1,551.86	2.04
<b>Outpatient Hospital</b>												
Emergency Room	1,305.3	\$75.35	\$8.20	940.9	\$49.83	\$3.91	1,870.7	\$74.93	\$11.68	1,509.5	\$49.06	\$6.17
Other Outpatient	12,824.2	40.51	43.29	7,947.8	60.69	40.20	17,452.6	40.34	58.67	11,887.4	67.75	67.12
<b>Pharmacy</b>												
Prescription Drugs/OTC Drugs	19,523.4	\$43.79	\$71.25	10,121.7	\$35.30	\$29.77	42,668.9	\$60.69	\$215.80	27,246.4	\$48.65	\$110.47
<b>Ancillaries</b>												
Transportation	10,630.1	\$3.72	\$3.29	417.7	\$26.75	\$0.93	61,257.6	\$2.59	\$13.24	988.4	\$30.18	\$2.49
DME, Home Health, Other Anc	10,161.3	4.82	4.08	1,657.5	12.14	1.68	46,697.8	5.46	21.24	25,313.4	8.50	17.92
<b>Physician</b>												
Inpatient and Outpatient Surgery	3,169.0	\$80.96	\$21.38	1,639.7	\$103.33	\$14.12	2,580.1	\$96.25	\$20.70	1,701.4	\$112.38	\$15.93
Office Visits/Consults	4,525.6	29.81	11.24	3,381.2	33.08	9.32	7,195.5	30.15	18.08	5,973.5	34.52	17.18
Well Baby Exams/Phys Exams	152.1	32.72	0.41	145.3	36.74	0.44	155.1	32.12	0.42	128.5	36.77	0.39
Hospital Inpatient Visits	708.5	52.13	3.08	520.9	54.26	2.36	1,347.7	47.37	5.32	1,526.5	49.49	6.30
Emergency Room Visits	1,272.2	49.12	5.21	1,071.8	44.30	3.96	1,840.0	51.99	7.97	1,569.2	55.71	7.29
Radiology/Pathology	9,282.6	20.68	16.00	7,557.6	20.26	12.76	8,734.2	23.21	16.89	8,714.9	22.52	16.36
Outpatient Behavioral Health	1,430.7	41.22	4.91	NA	NA	NA	4,045.6	42.38	14.29	NA	NA	NA
Clinic Visit	714.4	78.89	4.70	-	0.00	0.00	773.6	83.23	5.37	-	0.00	0.00
Other Professional	11,356.5	16.11	15.25	6,927.3	16.38	9.46	13,502.3	19.22	21.63	23,610.4	12.12	23.85
<b>Total PMPM</b>			\$241.19			\$144.07			\$503.64			\$349.25
<b>Base Period Member Months</b>			936,235			1,522,790			71,766			96,086
<b>Morbidity Adjustment</b>			1.104			0.927			1.104			0.927

State of Indiana  
Office of Medicaid Policy & Planning  
Calendar Year 2007 Capitation Rates  
Composite Base Claims Experience

<u>Category of Service</u>	Statewide: Package A\B						Statewide: Package A\B MAU					
	Maternity Case Rate			Maternity Case Rate			Maternity Case Rate			Maternity Case Rate		
	PCCM Base Rate			Health Plans Base Rate			PCCM Base Rate			Health Plans Base Rate		
	<u>Util Rate</u> <u>Per Delivery</u>	<u>Cost</u> <u>Per</u> <u>Service</u>	<u>Cost Per</u> <u>Delivery</u>	<u>Util Rate</u> <u>Per Delivery</u>	<u>Cost</u> <u>Per</u> <u>Service</u>	<u>Cost Per</u> <u>Delivery</u>	<u>Util Rate</u> <u>Per Delivery</u>	<u>Cost</u> <u>Per</u> <u>Service</u>	<u>Cost Per</u> <u>Delivery</u>	<u>Util Rate</u> <u>Per Delivery</u>	<u>Cost</u> <u>Per</u> <u>Service</u>	<u>Cost Per</u> <u>Delivery</u>
<i>Inpatient Hospital</i>												
Maternity Delivery	2.4	\$879.04	\$2,129.00	2.5	\$790.38	\$1,977.45	2.4	\$1,007.82	\$2,393.40	2.5	\$801.97	\$2,006.47
<i>Physician</i>												
Normal Deliveries	0.7	\$687.62	\$471.31	1.0	\$614.44	\$584.67	0.7	\$690.50	\$462.91	0.9	\$642.00	\$571.87
Cesarean Deliveries	0.2	774.92	185.79	0.3	715.57	214.87	0.3	739.61	255.67	0.3	766.44	252.86
Non-Deliveries	9.0	32.06	289.35	7.3	34.34	249.11	10.5	32.91	346.37	6.9	32.58	225.64
<b>Total Cost Per Delivery</b>			\$3,075.45			\$3,026.09			\$3,458.35			\$3,056.84
<b>Base Period Deliveries</b>			38,723			35,223			267			381
<b>Morbidity Adjustment</b>			1.000			1.000			1.000			1.000





**CONFIDENTIAL - FOR INTERNAL DISCUSSIONS ONLY**

## **ATTACHMENT 3**

**State of Indiana**  
**Office of Medicaid Policy and Planning**  
**CY2007 Capitation Rate Development**  
**Package: A\B**  
**Population: Newborns**  
**Non-MAU Eligible**  
**Low Rate Range**

4/25/2006  
 8:10 AM

**Base Member Months:** 799,065

<u>Category of Service</u>	<u>Base Util Rate Per 1,000</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per 1,000</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted PMPM</u>	<u>Trend</u>	<u>PMPM</u>
<i><b>Inpatient Hospital</b></i>									
Medical/Surgical	1,880.7	60%	1,128.4	\$695.53	102%	\$709.44	\$66.71	3.6%	\$71.60
Well Newborn	1,902.1	66%	1,255.4	383.45	96%	367.92	38.49	3.6%	41.31
Behavioral Health	0.1	35%	0.0	289.53	104%	300.39	0.00	4.0%	0.00
Other Inpatient	35.0	60%	21.0	549.80	97%	532.75	0.93	3.6%	1.00
<i><b>Outpatient Hospital</b></i>									
Emergency Room	1,172.1	51%	594.8	\$74.78	115%	\$86.00	\$4.26	6.0%	\$4.79
Other Outpatient	5,210.1	72%	3,751.3	33.30	103%	34.39	10.75	6.0%	12.08
<i><b>Pharmacy</b></i>									
Prescription Drugs/OTC Drugs	6,761.5	85%	5,747.3	\$36.04	101%	\$36.38	\$17.42	12.0%	\$21.85
<i><b>Ancillaries</b></i>									
Transportation	4,347.0	90%	3,912.3	\$5.87	100%	\$5.87	\$1.91	3.0%	\$2.03
DME, Home Health, Other Ancillary	8,312.0	62%	5,132.7	15.09	100%	15.09	6.45	6.0%	7.25
<i><b>Physician</b></i>									
Inpatient and Outpatient Surgery	1,202.4	81%	971.0	\$61.17	104%	\$63.31	\$5.12	6.0%	\$5.76
Office Visits/Consults	5,275.5	105%	5,539.2	26.46	108%	28.45	13.13	6.0%	14.75
Well Baby Exams/Physical Exams	3,635.8	110%	3,999.4	33.47	102%	34.14	11.38	6.0%	12.79
Hospital Inpatient Visits	4,030.8	50%	2,015.4	62.52	110%	68.78	11.55	6.0%	12.98
Emergency Room Visits	1,139.3	34%	384.5	44.09	106%	46.52	1.49	6.0%	1.67
Radiology/Pathology	2,141.9	85%	1,820.6	12.38	100%	12.38	1.88	5.0%	2.07
Outpatient Behavioral Health	7.6	60%	4.6	64.64	102%	65.93	0.03	4.0%	0.03
Clinic Visit	1,197.4	110%	1,320.2	87.52	100%	87.52	9.63	5.0%	10.62
Other Professional	9,653.4	105%	10,136.1	17.75	100%	17.75	15.00	4.0%	16.22
<b>Total PMPM</b>							\$216.14	4.5%	\$238.80

**State of Indiana**  
**Office of Medicaid Policy and Planning**  
**CY2007 Capitation Rate Development**  
**Package: A\B**  
**Population: Newborns**  
**Non-MAU Eligible**  
**High Rate Range**

4/25/2006  
 8:10 AM

Base Member Months: 799,065

<u>Category of Service</u>	<u>Base Util Rate Per 1,000</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per 1,000</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted PMPM</u>	<u>Trend</u>	<u>PMPM</u>
<i><b>Inpatient Hospital</b></i>									
Medical/Surgical	1,880.7	70%	1,316.6	\$695.53	101%	\$700.16	\$76.82	3.6%	\$82.45
Well Newborn	1,902.1	62%	1,179.3	383.45	95%	365.49	35.92	3.6%	38.55
Behavioral Health	0.1	43%	0.0	289.53	101%	293.14	0.00	4.0%	0.00
Other Inpatient	35.0	53%	18.7	549.80	96%	525.79	0.82	3.6%	0.88
<i><b>Outpatient Hospital</b></i>									
Emergency Room	1,172.1	65%	764.9	\$74.78	105%	\$78.52	\$5.00	6.0%	\$5.62
Other Outpatient	5,210.1	77%	4,029.3	33.30	101%	33.66	11.30	6.0%	12.70
<i><b>Pharmacy</b></i>									
Prescription Drugs/OTC Drugs	6,761.5	95%	6,423.7	\$36.04	90%	\$32.55	\$17.42	12.0%	\$21.85
<i><b>Ancillaries</b></i>									
Transportation	4,347.0	97%	4,202.3	\$5.87	100%	\$5.87	\$2.06	3.0%	\$2.18
DME, Home Health, Other Ancillary	8,312.0	64%	5,312.8	15.09	100%	15.09	6.68	6.0%	7.51
<i><b>Physician</b></i>									
Inpatient and Outpatient Surgery	1,202.4	84%	1,005.1	\$61.17	101%	\$61.89	\$5.18	6.0%	\$5.82
Office Visits/Consults	5,275.5	102%	5,363.3	26.46	102%	27.12	12.12	6.0%	13.62
Well Baby Exams/Physical Exams	3,635.8	103%	3,756.9	33.47	101%	33.69	10.55	6.0%	11.85
Hospital Inpatient Visits	4,030.8	83%	3,359.7	62.52	103%	64.61	18.09	6.0%	20.32
Emergency Room Visits	1,139.3	61%	698.0	44.09	102%	44.90	2.61	6.0%	2.93
Radiology/Pathology	2,141.9	85%	1,820.6	12.38	100%	12.38	1.88	5.0%	2.07
Outpatient Behavioral Health	7.6	70%	5.3	64.64	101%	65.07	0.03	4.0%	0.03
Clinic Visit	1,197.4	107%	1,278.2	87.52	100%	87.52	9.32	5.0%	10.28
Other Professional	9,653.4	105%	10,136.1	17.75	100%	17.75	15.00	4.0%	16.22
<b>Total PMPM</b>							\$230.80	4.5%	\$254.90

**State of Indiana**  
**Office of Medicaid Policy and Planning**  
**CY2007 Capitation Rate Development**  
**Package: C**  
**Population: Newborns**  
**Non-MAU Eligible**  
**Low Rate Range**

4/25/2006  
 8:10 AM

Base Member Months: 5,417

<u>Category of Service</u>	<u>Base Util Rate Per 1,000</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per 1,000</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted PMPM</u>	<u>Trend</u>	<u>PMPM</u>
<i><b>Inpatient Hospital</b></i>									
Medical/Surgical	1,033.1	17%	175.6	\$673.55	102%	\$683.65	\$10.01	(1.0%)	\$9.81
Well Newborn	515.4	32%	162.4	366.20	95%	349.63	4.73	(1.0%)	4.64
Behavioral Health	-	32%	-	0.00	95%	0.00	0.00	(1.0%)	0.00
Other Inpatient	77.7	32%	24.5	348.38	95%	332.61	0.68	(1.0%)	0.66
<i><b>Outpatient Hospital</b></i>									
Emergency Room	672.0	53%	352.8	\$76.78	115%	\$88.30	\$2.60	10.0%	\$3.14
Other Outpatient	4,273.1	72%	3,076.7	41.53	103%	42.90	11.00	10.0%	13.31
<i><b>Pharmacy</b></i>									
Prescription Drugs/OTC Drugs	4,619.6	85%	3,926.6	\$43.11	95%	\$40.77	\$13.34	13.5%	\$17.19
<i><b>Ancillaries</b></i>									
Transportation	1,772.1	90%	1,594.9	\$24.18	100%	\$24.18	\$3.21	8.0%	\$3.75
DME, Home Health, Other Ancillary	4,545.2	52%	2,374.9	36.38	100%	36.38	7.20	8.0%	8.40
<i><b>Physician</b></i>									
Inpatient and Outpatient Surgery	898.6	38%	343.7	\$59.90	111%	\$66.19	\$1.90	5.5%	\$2.11
Office Visits/Consults	5,168.8	105%	5,427.3	29.41	108%	31.62	14.30	5.5%	15.92
Well Baby Exams/Physical Exams	3,371.1	120%	4,045.3	35.80	104%	37.23	12.55	5.5%	13.97
Hospital Inpatient Visits	1,761.3	30%	528.4	85.38	108%	92.21	4.06	5.5%	4.52
Emergency Room Visits	574.7	53%	301.7	44.93	103%	46.28	1.16	5.5%	1.30
Radiology/Pathology	2,179.4	80%	1,743.5	13.19	100%	13.19	1.92	10.0%	2.32
Outpatient Behavioral Health	-	80%	-	0.00	102%	0.00	0.00	10.0%	0.00
Clinic Visit	1,021.9	110%	1,126.6	78.98	100%	78.98	7.41	5.5%	8.25
Other Professional	8,685.2	105%	9,119.5	19.80	100%	19.80	15.05	5.5%	16.75
<b>Total PMPM</b>							\$111.12	5.8%	\$126.02

State of Indiana  
Office of Medicaid Policy and Planning  
CY2007 Capitation Rate Development  
Package: C  
Population: Newborns  
Non-MAU Eligible  
High Rate Range

4/25/2006  
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Base Member Months: 5,417

<u>Category of Service</u>	<u>Base Util Rate Per 1,000</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per 1,000</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted PMPM</u>	<u>Trend</u>	<u>PMPM</u>
<i>Inpatient Hospital</i>									
Medical/Surgical	1,033.1	18%	183.4	\$673.55	101%	\$681.13	\$10.41	(1.0%)	\$10.20
Well Newborn	515.4	31%	160.4	366.20	95%	349.19	4.67	(1.0%)	4.58
Behavioral Health	-	31%	-	0.00	95%	0.00	0.00	(1.0%)	0.00
Other Inpatient	77.7	31%	24.2	348.38	95%	332.20	0.67	(1.0%)	0.66
<i>Outpatient Hospital</i>									
Emergency Room	672.0	58%	390.6	\$76.78	111%	\$85.42	\$2.78	10.0%	\$3.36
Other Outpatient	4,273.1	74%	3,162.1	41.53	102%	42.56	11.22	10.0%	13.57
<i>Pharmacy</i>									
Prescription Drugs/OTC Drugs	4,619.6	89%	4,099.9	\$43.11	92%	\$39.74	\$13.58	13.5%	\$17.49
<i>Ancillaries</i>									
Transportation	1,772.1	93%	1,639.2	\$24.18	100%	\$24.18	\$3.30	8.0%	\$3.85
DME, Home Health, Other Ancillary	4,545.2	53%	2,406.1	36.38	100%	36.38	7.29	8.0%	8.51
<i>Physician</i>									
Inpatient and Outpatient Surgery	898.6	40%	358.9	\$59.90	108%	\$64.62	\$1.93	5.5%	\$2.15
Office Visits/Consults	5,168.8	104%	5,362.6	29.41	106%	31.07	13.88	5.5%	15.45
Well Baby Exams/Physical Exams	3,371.1	115%	3,876.8	35.80	103%	36.87	11.91	5.5%	13.26
Hospital Inpatient Visits	1,761.3	35%	616.5	85.38	106%	90.50	4.65	5.5%	5.17
Emergency Room Visits	574.7	58%	334.0	44.93	102%	45.94	1.28	5.5%	1.42
Radiology/Pathology	2,179.4	80%	1,743.5	13.19	100%	13.19	1.92	10.0%	2.32
Outpatient Behavioral Health	-	85%	-	0.00	102%	0.00	0.00	10.0%	0.00
Clinic Visit	1,021.9	109%	1,113.2	78.98	100%	78.98	7.33	5.5%	8.15
Other Professional	8,685.2	105%	9,119.5	19.80	100%	19.80	15.05	5.5%	16.75
<b>Total PMPM</b>							\$111.87	5.8%	\$126.90

**State of Indiana**  
**Office of Medicaid Policy and Planning**  
**CY2007 Capitation Rate Development**  
**Package: A\B**  
**Population: Preschoolers**  
**Non-MAU Eligible**  
**Low Rate Range**

4/25/2006  
 8:10 AM

Base Member Months: 1,946,223

<u>Category of Service</u>	<u>Base Util Rate Per 1,000</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per 1,000</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted PMPM</u>	<u>Trend</u>	<u>PMPM</u>
<i><b>Inpatient Hospital</b></i>									
Medical/Surgical	84.7	64%	54.0	\$987.37	108%	\$1,062.66	\$4.78	3.6%	\$5.13
Well Newborn	-	100%	-	0.00	100%	0.00	0.00	(1.0%)	0.00
Behavioral Health	14.9	35%	5.3	461.87	104%	479.19	0.21	4.0%	0.23
Other Inpatient	2.4	86%	2.0	548.22	103%	561.92	0.10	(1.0%)	0.09
<i><b>Outpatient Hospital</b></i>									
Emergency Room	845.0	39%	329.5	\$75.72	120%	\$90.86	\$2.50	5.0%	\$2.75
Other Outpatient	2,918.6	70%	2,043.0	44.19	100%	44.19	7.52	5.0%	8.30
<i><b>Pharmacy</b></i>									
Prescription Drugs/OTC Drugs	6,271.6	67%	4,170.6	\$37.97	90%	\$34.29	\$11.92	4.0%	\$12.89
<i><b>Ancillaries</b></i>									
Transportation	3,903.2	80%	3,122.6	\$3.22	100%	\$3.22	\$0.84	12.0%	\$1.05
DME, Home Health, Other Ancillary	6,029.1	62%	3,722.9	5.27	100%	5.27	1.63	10.0%	1.98
<i><b>Physician</b></i>									
Inpatient and Outpatient Surgery	684.1	71%	487.4	\$56.43	104%	\$58.41	\$2.37	5.0%	\$2.62
Office Visits/Consults	3,486.9	105%	3,661.2	25.82	108%	27.76	8.47	5.0%	9.34
Well Baby Exams/Physical Exams	802.8	110%	883.1	33.33	102%	34.00	2.50	5.0%	2.76
Hospital Inpatient Visits	174.7	60%	104.8	57.03	108%	61.60	0.54	5.0%	0.59
Emergency Room Visits	783.4	39%	301.6	41.07	105%	42.92	1.08	5.0%	1.19
Radiology/Pathology	1,445.6	85%	1,228.8	11.76	100%	11.76	1.20	10.0%	1.46
Outpatient Behavioral Health	285.4	60%	171.2	49.90	102%	50.90	0.73	4.0%	0.79
Clinic Visit	435.6	110%	480.3	72.69	100%	72.69	2.91	5.0%	3.21
Other Professional	4,318.0	115%	4,965.7	12.38	100%	12.38	5.12	4.0%	5.54
<b>Total PMPM</b>							\$54.42	4.4%	\$59.91

**State of Indiana**  
**Office of Medicaid Policy and Planning**  
**CY2007 Capitation Rate Development**  
**Package: A\B**  
**Population: Preschoolers**  
**Non-MAU Eligible**  
**High Rate Range**

4/25/2006  
 8:10 AM

Base Member Months: 1,946,223

<u>Category of Service</u>	<u>Base Util Rate Per 1,000</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per 1,000</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted PMPM</u>	<u>Trend</u>	<u>PMPM</u>
<i><b>Inpatient Hospital</b></i>									
Medical/Surgical	84.7	78%	66.0	\$987.37	106%	\$1,045.37	\$5.75	3.6%	\$6.17
Well Newborn	-	100%	-	0.00	100%	0.00	0.00	(1.0%)	0.00
Behavioral Health	14.9	43%	6.4	461.87	101%	467.64	0.25	4.0%	0.27
Other Inpatient	2.4	105%	2.5	548.22	101%	552.78	0.11	(1.0%)	0.11
<i><b>Outpatient Hospital</b></i>									
Emergency Room	845.0	56%	476.1	\$75.72	107%	\$80.76	\$3.20	5.0%	\$3.53
Other Outpatient	2,918.6	70%	2,043.0	44.19	100%	44.19	7.52	5.0%	8.30
<i><b>Pharmacy</b></i>									
Prescription Drugs/OTC Drugs	6,271.6	80%	5,017.3	\$37.97	85%	\$32.28	\$13.49	4.0%	\$14.60
<i><b>Ancillaries</b></i>									
Transportation	3,903.2	93%	3,643.2	\$3.22	100%	\$3.22	\$0.98	12.0%	\$1.23
DME, Home Health, Other Ancillary	6,029.1	64%	3,853.6	5.27	100%	5.27	1.69	10.0%	2.05
<i><b>Physician</b></i>									
Inpatient and Outpatient Surgery	684.1	74%	504.5	\$56.43	101%	\$57.09	\$2.40	5.0%	\$2.65
Office Visits/Consults	3,486.9	102%	3,544.9	25.82	102%	26.46	7.82	5.0%	8.62
Well Baby Exams/Physical Exams	802.8	103%	829.6	33.33	101%	33.55	2.32	5.0%	2.56
Hospital Inpatient Visits	174.7	87%	151.4	57.03	103%	58.55	0.74	5.0%	0.81
Emergency Room Visits	783.4	60%	466.2	41.07	101%	41.68	1.62	5.0%	1.79
Radiology/Pathology	1,445.6	85%	1,228.8	11.76	100%	11.76	1.20	10.0%	1.46
Outpatient Behavioral Health	285.4	70%	199.8	49.90	101%	50.23	0.84	4.0%	0.90
Clinic Visit	435.6	112%	487.1	72.69	100%	72.69	2.95	5.0%	3.25
Other Professional	4,318.0	115%	4,965.7	12.38	100%	12.38	5.12	4.0%	5.54
<b>Total PMPM</b>							\$58.02	4.3%	\$63.83

**State of Indiana**  
**Office of Medicaid Policy and Planning**  
**CY2007 Capitation Rate Development**  
**Package: C**  
**Population: Preschoolers**  
**Non-MAU Eligible**  
**Low Rate Range**

4/25/2006  
 8:10 AM

Base Member Months: 65,202

<u>Category of Service</u>	<u>Base Util Rate Per 1,000</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per 1,000</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted PMPM</u>	<u>Trend</u>	<u>PMPM</u>
<i><b>Inpatient Hospital</b></i>									
Medical/Surgical	63.5	60%	38.1	\$825.17	107%	\$883.76	\$2.81	(1.0%)	\$2.75
Well Newborn	-	100%	-	0.00	100%	0.00	0.00	(1.0%)	0.00
Behavioral Health	2.8	60%	1.7	157.70	102%	160.85	0.02	(1.0%)	0.02
Other Inpatient	6.5	60%	3.9	554.17	102%	565.25	0.18	(1.0%)	0.18
<i><b>Outpatient Hospital</b></i>									
Emergency Room	673.0	42%	284.3	\$77.33	118%	\$90.87	\$2.15	10.0%	\$2.61
Other Outpatient	3,524.5	63%	2,220.4	51.10	103%	52.78	9.77	10.0%	11.82
<i><b>Pharmacy</b></i>									
Prescription Drugs/OTC Drugs	6,472.1	64%	4,126.0	\$45.84	95%	\$43.34	\$14.90	13.5%	\$19.20
<i><b>Ancillaries</b></i>									
Transportation	368.6	80%	294.9	\$14.81	100%	\$14.81	\$0.36	8.0%	\$0.42
DME, Home Health, Other Ancillary	9,190.1	52%	4,801.8	4.62	100%	4.62	1.85	8.0%	2.16
<i><b>Physician</b></i>									
Inpatient and Outpatient Surgery	816.5	68%	551.1	\$61.89	107%	\$66.22	\$3.04	5.5%	\$3.39
Office Visits/Consults	4,427.9	105%	4,649.3	27.55	108%	29.62	11.48	5.5%	12.77
Well Baby Exams/Physical Exams	896.6	115%	1,031.1	35.55	103%	36.62	3.15	5.5%	3.50
Hospital Inpatient Visits	126.1	70%	88.3	63.02	106%	66.80	0.49	5.5%	0.55
Emergency Room Visits	566.1	29%	165.6	42.87	106%	45.23	0.62	5.5%	0.69
Radiology/Pathology	1,816.7	68%	1,235.4	12.84	100%	12.84	1.32	10.0%	1.60
Outpatient Behavioral Health	245.9	80%	196.7	49.96	102%	50.95	0.84	10.0%	1.01
Clinic Visit	390.3	110%	430.3	77.88	100%	77.88	2.79	5.5%	3.11
Other Professional	5,163.4	105%	5,421.5	12.26	100%	12.26	5.54	5.5%	6.17
<b>Total PMPM</b>							\$61.32	7.4%	\$71.94



State of Indiana  
Office of Medicaid Policy and Planning  
CY2007 Capitation Rate Development  
Package: C  
Population: Preschoolers  
Non-MAU Eligible  
High Rate Range

4/25/2006  
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Base Member Months: 65,202

<u>Category of Service</u>	<u>Base Util Rate Per 1,000</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per 1,000</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted PMPM</u>	<u>Trend</u>	<u>PMPM</u>
<i>Inpatient Hospital</i>									
Medical/Surgical	63.5	64%	40.5	\$825.17	107%	\$879.43	\$2.97	(1.0%)	\$2.91
Well Newborn	-	100%	-	0.00	100%	0.00	0.00	(1.0%)	0.00
Behavioral Health	2.8	64%	1.8	157.70	102%	160.06	0.02	(1.0%)	0.02
Other Inpatient	6.5	64%	4.1	554.17	102%	562.48	0.19	(1.0%)	0.19
<i>Outpatient Hospital</i>									
Emergency Room	673.0	48%	322.6	\$77.33	113%	\$87.48	\$2.35	10.0%	\$2.85
Other Outpatient	3,524.5	65%	2,282.1	51.10	102%	52.36	9.96	10.0%	12.05
<i>Pharmacy</i>									
Prescription Drugs/OTC Drugs	6,472.1	80%	5,169.6	\$45.84	92%	\$42.25	\$18.20	13.5%	\$23.45
<i>Ancillaries</i>									
Transportation	368.6	85%	313.3	\$14.81	100%	\$14.81	\$0.39	8.0%	\$0.45
DME, Home Health, Other Ancillary	9,190.1	53%	4,865.0	4.62	100%	4.62	1.87	8.0%	2.18
<i>Physician</i>									
Inpatient and Outpatient Surgery	816.5	69%	566.4	\$61.89	105%	\$65.14	\$3.07	5.5%	\$3.42
Office Visits/Consults	4,427.9	104%	4,594.0	27.55	106%	29.10	11.14	5.5%	12.40
Well Baby Exams/Physical Exams	896.6	111%	997.5	35.55	102%	36.35	3.02	5.5%	3.36
Hospital Inpatient Visits	126.1	78%	97.7	63.02	105%	65.86	0.54	5.5%	0.60
Emergency Room Visits	566.1	38%	216.2	42.87	104%	44.64	0.80	5.5%	0.90
Radiology/Pathology	1,816.7	71%	1,289.9	12.84	100%	12.84	1.38	10.0%	1.67
Outpatient Behavioral Health	245.9	85%	209.0	49.96	102%	50.71	0.88	10.0%	1.07
Clinic Visit	390.3	109%	425.2	77.88	100%	77.88	2.76	5.5%	3.07
Other Professional	5,163.4	105%	5,421.5	12.26	100%	12.26	5.54	5.5%	6.17
<b>Total PMPM</b>							\$65.09	7.6%	\$76.75

**State of Indiana**  
**Office of Medicaid Policy and Planning**  
**CY2007 Capitation Rate Development**  
**Package: A\B**  
**Population: Children**  
**Non-MAU Eligible**  
**Low Rate Range**

4/25/2006  
 8:10 AM

Base Member Months: 2,155,281

<u>Category of Service</u>	<u>Base Util Rate Per 1,000</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per 1,000</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted PMPM</u>	<u>Trend</u>	<u>PMPM</u>
<i><b>Inpatient Hospital</b></i>									
Medical/Surgical	39.3	80%	31.5	\$1,089.37	107%	\$1,166.71	\$3.06	3.6%	\$3.28
Well Newborn	-	100%	-	0.00	100%	0.00	0.00	(1.0%)	0.00
Behavioral Health	128.3	35%	45.2	455.52	104%	472.60	1.78	4.0%	1.93
Other Inpatient	1.0	60%	0.6	795.15	87%	689.40	0.03	(1.0%)	0.03
<i><b>Outpatient Hospital</b></i>									
Emergency Room	462.5	56%	260.2	\$76.75	113%	\$86.34	\$1.87	5.0%	\$2.06
Other Outpatient	2,065.0	60%	1,228.6	42.10	105%	44.18	4.52	5.0%	4.99
<i><b>Pharmacy</b></i>									
Prescription Drugs/OTC Drugs	7,089.4	76%	5,388.0	\$60.19	90%	\$54.36	\$24.41	4.0%	\$26.40
<i><b>Ancillaries</b></i>									
Transportation	5,627.6	80%	4,502.1	\$2.43	100%	\$2.43	\$0.91	12.0%	\$1.14
DME, Home Health, Other Ancillary	6,324.9	67%	4,206.1	3.27	100%	3.27	1.15	10.0%	1.39
<i><b>Physician</b></i>									
Inpatient and Outpatient Surgery	486.7	71%	346.8	\$58.04	104%	\$60.07	\$1.74	5.0%	\$1.91
Office Visits/Consults	2,465.1	115%	2,834.9	26.23	123%	32.13	7.59	5.0%	8.37
Well Baby Exams/Physical Exams	230.4	120%	276.5	32.87	104%	34.19	0.79	5.0%	0.87
Hospital Inpatient Visits	188.7	75%	141.5	45.78	105%	48.07	0.57	5.0%	0.63
Emergency Room Visits	413.9	56%	232.8	41.18	103%	42.21	0.82	5.0%	0.90
Radiology/Pathology	1,342.5	77%	1,027.0	13.20	100%	13.20	1.13	10.0%	1.37
Outpatient Behavioral Health	1,935.7	60%	1,161.4	37.85	102%	38.61	3.74	4.0%	4.04
Clinic Visit	263.4	149%	391.2	80.81	100%	80.81	2.63	5.0%	2.90
Other Professional	4,413.2	125%	5,516.6	16.16	100%	16.16	7.43	4.0%	8.04
<b>Total PMPM</b>							\$64.17	4.1%	\$70.25

**State of Indiana**  
**Office of Medicaid Policy and Planning**  
**CY2007 Capitation Rate Development**  
**Package: A\B**  
**Population: Children**  
**Non-MAU Eligible**  
**High Rate Range**

4/25/2006  
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Base Member Months: 2,155,281

<u>Category of Service</u>	<u>Base Util Rate Per 1,000</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per 1,000</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted PMPM</u>	<u>Trend</u>	<u>PMPM</u>
<b><i>Inpatient Hospital</i></b>									
Medical/Surgical	39.3	93%	36.7	\$1,089.37	106%	\$1,151.45	\$3.52	3.6%	\$3.78
Well Newborn	-	100%	-	0.00	100%	0.00	0.00	(1.0%)	0.00
Behavioral Health	128.3	43%	55.3	455.52	101%	461.21	2.12	4.0%	2.30
Other Inpatient	1.0	70%	0.7	795.15	86%	680.38	0.04	(1.0%)	0.04
<b><i>Outpatient Hospital</i></b>									
Emergency Room	462.5	69%	318.0	\$76.75	104%	\$79.94	\$2.12	5.0%	\$2.34
Other Outpatient	2,065.0	67%	1,373.3	42.10	102%	42.79	4.90	5.0%	5.40
<b><i>Pharmacy</i></b>									
Prescription Drugs/OTC Drugs	7,089.4	86%	6,100.0	\$60.19	87%	\$52.23	\$26.55	4.0%	\$28.72
<b><i>Ancillaries</i></b>									
Transportation	5,627.6	93%	5,252.8	\$2.43	100%	\$2.43	\$1.06	12.0%	\$1.34
DME, Home Health, Other Ancillary	6,324.9	69%	4,353.7	3.27	100%	3.27	1.19	10.0%	1.44
<b><i>Physician</i></b>									
Inpatient and Outpatient Surgery	486.7	74%	358.9	\$58.04	101%	\$58.72	\$1.76	5.0%	\$1.94
Office Visits/Consults	2,465.1	105%	2,588.2	26.23	107%	28.19	6.08	5.0%	6.70
Well Baby Exams/Physical Exams	230.4	107%	245.8	32.87	101%	33.31	0.68	5.0%	0.75
Hospital Inpatient Visits	188.7	92%	173.0	45.78	102%	46.55	0.67	5.0%	0.74
Emergency Room Visits	413.9	69%	284.6	41.18	101%	41.52	0.98	5.0%	1.09
Radiology/Pathology	1,342.5	82%	1,103.1	13.20	100%	13.20	1.21	10.0%	1.47
Outpatient Behavioral Health	1,935.7	70%	1,355.1	37.85	101%	38.10	4.30	4.0%	4.65
Clinic Visit	263.4	139%	367.5	80.81	100%	80.81	2.47	5.0%	2.73
Other Professional	4,413.2	125%	5,516.6	16.16	100%	16.16	7.43	4.0%	8.04
<b>Total PMPM</b>							\$67.10	4.1%	\$73.44

**State of Indiana**  
**Office of Medicaid Policy and Planning**  
**CY2007 Capitation Rate Development**  
**Package: C**  
**Population: Children**  
**Non-MAU Eligible**  
**Low Rate Range**

4/25/2006  
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Base Member Months: 86,485

<u>Category of Service</u>	<u>Base Util Rate Per 1,000</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per 1,000</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted PMPM</u>	<u>Trend</u>	<u>PMPM</u>
<i><b>Inpatient Hospital</b></i>									
Medical/Surgical	45.0	70%	31.5	\$1,129.51	108%	\$1,221.57	\$3.21	(1.0%)	\$3.15
Well Newborn	-	100%	-	0.00	100%	0.00	0.00	(1.0%)	0.00
Behavioral Health	28.0	60%	16.8	515.88	87%	447.27	0.63	(1.0%)	0.61
Other Inpatient	0.4	60%	0.3	226.13	87%	196.05	0.00	(1.0%)	0.00
<i><b>Outpatient Hospital</b></i>									
Emergency Room	394.0	56%	221.6	\$79.02	113%	\$88.89	\$1.64	10.0%	\$1.99
Other Outpatient	2,806.8	56%	1,571.8	44.61	107%	47.55	6.23	10.0%	7.54
<i><b>Pharmacy</b></i>									
Prescription Drugs/OTC Drugs	6,926.8	70%	4,848.8	\$70.64	85%	\$60.05	\$24.26	13.5%	\$31.26
<i><b>Ancillaries</b></i>									
Transportation	494.4	80%	395.5	\$6.23	100%	\$6.23	\$0.21	8.0%	\$0.24
DME, Home Health, Other Ancillary	9,526.0	62%	5,882.3	3.01	100%	3.01	1.48	8.0%	1.72
<i><b>Physician</b></i>									
Inpatient and Outpatient Surgery	603.3	71%	429.9	\$64.99	104%	\$67.26	\$2.41	5.5%	\$2.68
Office Visits/Consults	3,142.9	105%	3,300.0	28.46	108%	30.60	8.41	5.5%	9.37
Well Baby Exams/Physical Exams	306.1	105%	321.4	35.37	101%	35.72	0.96	5.5%	1.06
Hospital Inpatient Visits	107.7	70%	75.4	55.03	106%	58.33	0.37	5.5%	0.41
Emergency Room Visits	333.3	33%	108.3	43.88	105%	46.07	0.42	5.5%	0.46
Radiology/Pathology	1,772.5	64%	1,134.4	15.58	100%	15.58	1.47	10.0%	1.78
Outpatient Behavioral Health	1,523.4	80%	1,218.7	49.04	102%	50.02	5.08	10.0%	6.15
Clinic Visit	283.4	110%	312.4	76.99	100%	76.99	2.00	5.5%	2.23
Other Professional	6,746.2	105%	7,083.5	15.06	100%	15.06	8.89	5.5%	9.89
<b>Total PMPM</b>							\$67.66	8.1%	\$80.54

State of Indiana  
Office of Medicaid Policy and Planning  
CY2007 Capitation Rate Development  
Package: C  
Population: Children  
Non-MAU Eligible  
High Rate Range

4/25/2006  
8:10 AM

Base Member Months: 86,485

<u>Category of Service</u>	<u>Base Util Rate Per 1,000</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per 1,000</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted PMPM</u>	<u>Trend</u>	<u>PMPM</u>
<i>Inpatient Hospital</i>									
Medical/Surgical	45.0	90%	40.5	\$1,129.51	106%	\$1,197.83	\$4.05	(1.0%)	\$3.97
Well Newborn	-	100%	-	0.00	100%	0.00	0.00	(1.0%)	0.00
Behavioral Health	28.0	70%	19.6	515.88	86%	441.42	0.72	(1.0%)	0.71
Other Inpatient	0.4	70%	0.3	226.13	86%	193.49	0.00	(1.0%)	0.00
<i>Outpatient Hospital</i>									
Emergency Room	394.0	80%	316.0	\$79.02	104%	\$82.31	\$2.17	10.0%	\$2.62
Other Outpatient	2,806.8	65%	1,833.9	44.61	102%	45.59	6.97	10.0%	8.43
<i>Pharmacy</i>									
Prescription Drugs/OTC Drugs	6,926.8	85%	5,887.8	\$70.64	85%	\$60.05	\$29.46	13.5%	\$37.95
<i>Ancillaries</i>									
Transportation	494.4	93%	461.5	\$6.23	100%	\$6.23	\$0.24	8.0%	\$0.28
DME, Home Health, Other Ancillary	9,526.0	64%	6,088.8	3.01	100%	3.01	1.53	8.0%	1.78
<i>Physician</i>									
Inpatient and Outpatient Surgery	603.3	74%	445.0	\$64.99	101%	\$65.75	\$2.44	5.5%	\$2.71
Office Visits/Consults	3,142.9	102%	3,195.2	28.46	102%	29.18	7.77	5.5%	8.65
Well Baby Exams/Physical Exams	306.1	102%	311.2	35.37	100%	35.48	0.92	5.5%	1.02
Hospital Inpatient Visits	107.7	90%	96.9	55.03	102%	56.13	0.45	5.5%	0.50
Emergency Room Visits	333.3	54%	180.5	43.88	102%	44.61	0.67	5.5%	0.75
Radiology/Pathology	1,772.5	75%	1,323.5	15.58	100%	15.58	1.72	10.0%	2.08
Outpatient Behavioral Health	1,523.4	93%	1,421.9	49.04	101%	49.36	5.85	10.0%	7.08
Clinic Visit	283.4	107%	302.5	76.99	100%	76.99	1.94	5.5%	2.16
Other Professional	6,746.2	105%	7,083.5	15.06	100%	15.06	8.89	5.5%	9.89
<b>Total PMPM</b>							\$75.78	8.3%	\$90.59

**State of Indiana**  
**Office of Medicaid Policy and Planning**  
**CY2007 Capitation Rate Development**  
**Package: A\B**  
**Population: Adolescents**  
**Non-MAU Eligible**  
**Low Rate Range**

4/25/2006  
 8:10 AM

Base Member Months: 1,452,414

<u>Category of Service</u>	<u>Base Util Rate Per 1,000</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per 1,000</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted PMPM</u>	<u>Trend</u>	<u>PMPM</u>
<b><i>Inpatient Hospital</i></b>									
Medical/Surgical	90.9	83%	75.0	\$1,027.99	103%	\$1,053.69	\$6.59	3.6%	\$7.07
Well Newborn	-	100%	-	0.00	100%	0.00	0.00	(1.0%)	0.00
Behavioral Health	202.1	35%	71.3	443.30	104%	459.93	2.73	4.0%	2.95
Other Inpatient	0.9	81%	0.8	1,032.80	86%	891.05	0.06	(1.0%)	0.06
<b><i>Outpatient Hospital</i></b>									
Emergency Room	759.4	56%	427.1	\$75.52	113%	\$84.96	\$3.02	5.0%	\$3.33
Other Outpatient	5,609.0	63%	3,533.7	34.35	103%	35.49	10.45	5.0%	11.52
<b><i>Pharmacy</i></b>									
Prescription Drugs/OTC Drugs	9,338.6	76%	7,097.3	\$52.08	90%	\$47.03	\$27.82	4.0%	\$30.09
<b><i>Ancillaries</i></b>									
Transportation	6,662.1	75%	4,996.6	\$3.27	100%	\$3.27	\$1.36	12.0%	\$1.71
DME, Home Health, Other Ancillary	5,658.7	71%	4,031.9	4.43	100%	4.43	1.49	10.0%	1.80
<b><i>Physician</i></b>									
Inpatient and Outpatient Surgery	1,118.4	71%	796.9	\$61.25	104%	\$63.39	\$4.21	5.0%	\$4.64
Office Visits/Consults	2,856.8	110%	3,142.5	27.19	115%	31.26	8.19	5.0%	9.03
Well Baby Exams/Physical Exams	215.8	105%	226.6	30.25	101%	30.55	0.58	5.0%	0.64
Hospital Inpatient Visits	437.7	80%	350.2	47.65	104%	49.56	1.45	5.0%	1.59
Emergency Room Visits	701.5	60%	420.9	46.27	103%	47.42	1.66	5.0%	1.83
Radiology/Pathology	3,759.8	81%	3,036.0	16.53	100%	16.53	4.18	10.0%	5.06
Outpatient Behavioral Health	1,521.0	60%	912.6	41.44	102%	42.27	3.21	4.0%	3.48
Clinic Visit	405.5	121%	490.6	78.23	100%	78.23	3.20	5.0%	3.53
Other Professional	6,656.7	140%	9,319.4	15.79	100%	15.79	12.27	4.0%	13.27
<b>Total PMPM</b>							\$92.46	4.3%	\$101.59

State of Indiana  
Office of Medicaid Policy and Planning  
CY2007 Capitation Rate Development  
Package: A\B  
Population: Adolescents  
Non-MAU Eligible  
High Rate Range

4/25/2006  
8:10 AM

Base Member Months: 1,452,414

<u>Category of Service</u>	<u>Base Util Rate Per 1,000</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per 1,000</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted PMPM</u>	<u>Trend</u>	<u>PMPM</u>
<i>Inpatient Hospital</i>									
Medical/Surgical	90.9	92%	83.4	\$1,027.99	101%	\$1,036.55	\$7.20	3.6%	\$7.73
Well Newborn	-	100%	-	0.00	100%	0.00	0.00	(1.0%)	0.00
Behavioral Health	202.1	43%	87.1	443.30	101%	448.84	3.26	4.0%	3.52
Other Inpatient	0.9	90%	0.8	1,032.80	85%	882.27	0.06	(1.0%)	0.06
<i>Outpatient Hospital</i>									
Emergency Room	759.4	69%	522.1	\$75.52	104%	\$78.66	\$3.42	5.0%	\$3.77
Other Outpatient	5,609.0	68%	3,795.6	34.35	101%	34.73	10.98	5.0%	12.11
<i>Pharmacy</i>									
Prescription Drugs/OTC Drugs	9,338.6	79%	7,346.5	\$52.08	87%	\$45.19	\$27.66	4.0%	\$29.92
<i>Ancillaries</i>									
Transportation	6,662.1	92%	6,107.5	\$3.27	100%	\$3.27	\$1.67	12.0%	\$2.09
DME, Home Health, Other Ancillary	5,658.7	74%	4,173.4	4.43	100%	4.43	1.54	10.0%	1.86
<i>Physician</i>									
Inpatient and Outpatient Surgery	1,118.4	74%	824.8	\$61.25	101%	\$61.96	\$4.26	5.0%	\$4.70
Office Visits/Consults	2,856.8	100%	2,856.8	27.19	100%	27.19	6.47	5.0%	7.14
Well Baby Exams/Physical Exams	215.8	100%	215.8	30.25	100%	30.25	0.54	5.0%	0.60
Hospital Inpatient Visits	437.7	93%	408.6	47.65	101%	48.29	1.64	5.0%	1.81
Emergency Room Visits	701.5	73%	514.5	46.27	101%	46.65	2.00	5.0%	2.21
Radiology/Pathology	3,759.8	84%	3,142.6	16.53	100%	16.53	4.33	10.0%	5.24
Outpatient Behavioral Health	1,521.0	70%	1,064.8	41.44	101%	41.72	3.70	4.0%	4.00
Clinic Visit	405.5	114%	460.9	78.23	100%	78.23	3.00	5.0%	3.31
Other Professional	6,656.7	140%	9,319.4	15.79	100%	15.79	12.27	4.0%	13.27
<b>Total PMPM</b>							\$94.02	4.3%	\$103.34

**State of Indiana**  
**Office of Medicaid Policy and Planning**  
**CY2007 Capitation Rate Development**  
**Package: C**  
**Population: Adolescents**  
**Non-MAU Eligible**  
**Low Rate Range**

4/25/2006  
 8:10 AM

Base Member Months: 54,882

<u>Category of Service</u>	<u>Base Util Rate Per 1,000</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per 1,000</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted PMPM</u>	<u>Trend</u>	<u>PMPM</u>
<i><b>Inpatient Hospital</b></i>									
Medical/Surgical	59.6	77%	45.9	\$1,270.14	103%	\$1,308.24	\$5.00	(1.0%)	\$4.91
Well Newborn	-	100%	-	0.00	100%	0.00	0.00	(1.0%)	0.00
Behavioral Health	79.3	76%	60.3	488.34	87%	423.39	2.13	(1.0%)	2.09
Other Inpatient	0.4	76%	0.3	399.53	87%	346.39	0.01	(1.0%)	0.01
<i><b>Outpatient Hospital</b></i>									
Emergency Room	524.7	60%	314.8	\$77.81	110%	\$85.59	\$2.25	10.0%	\$2.72
Other Outpatient	4,292.9	56%	2,404.0	38.34	107%	40.87	8.19	10.0%	9.91
<i><b>Pharmacy</b></i>									
Prescription Drugs/OTC Drugs	8,820.9	56%	4,939.7	\$71.02	98%	\$69.42	\$28.58	13.5%	\$36.81
<i><b>Ancillaries</b></i>									
Transportation	1,120.5	80%	896.4	\$12.39	100%	\$12.39	\$0.93	8.0%	\$1.08
DME, Home Health, Other Ancillary	10,471.0	76%	7,958.0	3.28	100%	3.28	2.18	8.0%	2.54
<i><b>Physician</b></i>									
Inpatient and Outpatient Surgery	699.7	52%	365.6	\$81.76	104%	\$84.63	\$2.58	5.5%	\$2.87
Office Visits/Consults	3,441.8	105%	3,613.9	28.70	108%	30.86	9.29	5.5%	10.34
Well Baby Exams/Physical Exams	295.0	105%	309.8	31.77	101%	32.08	0.83	5.5%	0.92
Hospital Inpatient Visits	190.7	70%	133.5	54.54	106%	57.81	0.64	5.5%	0.72
Emergency Room Visits	515.4	36%	184.3	42.95	105%	44.89	0.69	5.5%	0.77
Radiology/Pathology	2,571.8	72%	1,858.1	19.07	100%	19.07	2.95	10.0%	3.57
Outpatient Behavioral Health	1,808.7	80%	1,447.0	45.83	102%	46.75	5.64	10.0%	6.82
Clinic Visit	415.5	110%	458.1	74.46	100%	74.46	2.84	5.5%	3.16
Other Professional	6,512.1	105%	6,837.8	17.23	100%	17.23	9.82	5.5%	10.93
<b>Total PMPM</b>							\$84.53	7.8%	\$100.16



**State of Indiana**  
**Office of Medicaid Policy and Planning**  
**CY2007 Capitation Rate Development**  
**Package: C**  
**Population: Adolescents**  
**Non-MAU Eligible**  
**High Rate Range**

4/25/2006  
 8:10 AM

Base Member Months: 54,882

<u>Category of Service</u>	<u>Base Util Rate Per 1,000</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per 1,000</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted PMPM</u>	<u>Trend</u>	<u>PMPM</u>
<b><i>Inpatient Hospital</i></b>									
Medical/Surgical	59.6	99%	59.0	\$1,270.14	101%	\$1,282.83	\$6.31	(1.0%)	\$6.18
Well Newborn	-	100%	-	0.00	100%	0.00	0.00	(1.0%)	0.00
Behavioral Health	79.3	89%	70.4	488.34	86%	417.86	2.45	(1.0%)	2.40
Other Inpatient	0.4	89%	0.4	399.53	86%	341.86	0.01	(1.0%)	0.01
<b><i>Outpatient Hospital</i></b>									
Emergency Room	524.7	75%	391.8	\$77.81	103%	\$80.40	\$2.63	10.0%	\$3.18
Other Outpatient	4,292.9	65%	2,804.9	38.34	102%	39.18	9.16	10.0%	11.08
<b><i>Pharmacy</i></b>									
Prescription Drugs/OTC Drugs	8,820.9	65%	5,763.4	\$71.02	89%	\$63.38	\$30.44	13.5%	\$39.21
<b><i>Ancillaries</i></b>									
Transportation	1,120.5	93%	1,045.9	\$12.39	100%	\$12.39	\$1.08	8.0%	\$1.26
DME, Home Health, Other Ancillary	10,471.0	79%	8,237.4	3.28	100%	3.28	2.25	8.0%	2.63
<b><i>Physician</i></b>									
Inpatient and Outpatient Surgery	699.7	54%	378.4	\$81.76	101%	\$82.72	\$2.61	5.5%	\$2.90
Office Visits/Consults	3,441.8	102%	3,499.1	28.70	102%	29.42	8.58	5.5%	9.55
Well Baby Exams/Physical Exams	295.0	102%	300.0	31.77	100%	31.87	0.80	5.5%	0.89
Hospital Inpatient Visits	190.7	90%	171.7	54.54	102%	55.63	0.80	5.5%	0.89
Emergency Room Visits	515.4	55%	284.8	42.95	101%	43.60	1.03	5.5%	1.15
Radiology/Pathology	2,571.8	81%	2,076.8	19.07	100%	19.07	3.30	10.0%	3.99
Outpatient Behavioral Health	1,808.7	93%	1,688.3	45.83	101%	46.14	6.49	10.0%	7.85
Clinic Visit	415.5	107%	443.6	74.46	100%	74.46	2.75	5.5%	3.06
Other Professional	6,512.1	105%	6,837.8	17.23	100%	17.23	9.82	5.5%	10.93
<b>Total PMPM</b>							\$90.50	7.8%	\$107.17

**State of Indiana**  
**Office of Medicaid Policy and Planning**  
**CY2007 Capitation Rate Development**  
**Package: A\B**  
**Population: Adult Males**  
**Non-MAU Eligible**  
**Low Rate Range**

4/25/2006  
 8:10 AM

Base Member Months: 138,288

<u>Category of Service</u>	<u>Base Util Rate Per 1,000</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per 1,000</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted PMPM</u>	<u>Trend</u>	<u>PMPM</u>
<b><i>Inpatient Hospital</i></b>									
Medical/Surgical	265.9	74%	197.4	\$1,568.15	98%	\$1,538.16	\$25.31	(1.0%)	\$24.81
Well Newborn	-	100%	-	0.00	100%	0.00	0.00	(1.0%)	0.00
Behavioral Health	120.2	54%	64.9	510.39	104%	529.52	2.86	4.0%	3.10
Other Inpatient	4.4	83%	3.7	1,308.52	97%	1,274.17	0.39	(1.0%)	0.38
<b><i>Outpatient Hospital</i></b>									
Emergency Room	1,300.3	68%	884.2	\$76.20	110%	\$83.81	\$6.18	5.0%	\$6.81
Other Outpatient	8,931.5	72%	6,430.7	51.45	103%	53.15	28.48	5.0%	31.40
<b><i>Pharmacy</i></b>									
Prescription Drugs/OTC Drugs	18,440.1	70%	12,931.1	\$56.56	98%	\$55.14	\$59.42	4.0%	\$64.27
<b><i>Ancillaries</i></b>									
Transportation	12,409.9	80%	9,927.9	\$3.81	100%	\$3.81	\$3.16	12.0%	\$3.96
DME, Home Health, Other Ancillary	15,888.0	76%	12,074.9	7.25	100%	7.25	7.30	10.0%	8.83
<b><i>Physician</i></b>									
Inpatient and Outpatient Surgery	1,745.1	76%	1,326.3	\$110.29	104%	\$114.15	\$12.62	5.0%	\$13.91
Office Visits/Consults	4,239.7	110%	4,663.7	30.82	115%	35.44	13.77	5.0%	15.18
Well Baby Exams/Physical Exams	30.0	105%	31.5	34.20	101%	34.54	0.09	5.0%	0.10
Hospital Inpatient Visits	516.5	80%	413.2	50.21	104%	52.22	1.80	5.0%	1.98
Emergency Room Visits	1,261.9	68%	858.1	48.34	102%	49.31	3.53	5.0%	3.89
Radiology/Pathology	4,394.9	90%	3,966.4	27.44	100%	27.44	9.07	10.0%	10.97
Outpatient Behavioral Health	1,196.9	51%	612.8	41.77	102%	42.60	2.18	4.0%	2.35
Clinic Visit	476.0	115%	547.4	82.72	100%	82.72	3.77	5.0%	4.16
Other Professional	9,708.5	160%	15,533.6	19.32	100%	19.32	25.02	4.0%	27.06
<b>Total PMPM</b>							\$204.93	3.9%	\$223.16

State of Indiana  
Office of Medicaid Policy and Planning  
CY2007 Capitation Rate Development  
Package: A\B  
Population: Adult Males  
Non-MAU Eligible  
High Rate Range

4/25/2006  
8:10 AM

Base Member Months: 138,288

<u>Category of Service</u>	<u>Base Util Rate Per 1,000</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per 1,000</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted PMPM</u>	<u>Trend</u>	<u>PMPM</u>
<i>Inpatient Hospital</i>									
Medical/Surgical	265.9	89%	237.1	\$1,568.15	96%	\$1,505.87	\$29.76	(1.0%)	\$29.17
Well Newborn	-	100%	-	0.00	100%	0.00	0.00	(1.0%)	0.00
Behavioral Health	120.2	66%	79.3	510.39	101%	516.76	3.42	4.0%	3.69
Other Inpatient	4.4	101%	4.5	1,308.52	96%	1,253.44	0.47	(1.0%)	0.46
<i>Outpatient Hospital</i>									
Emergency Room	1,300.3	79%	1,031.6	\$76.20	103%	\$78.73	\$6.77	5.0%	\$7.46
Other Outpatient	8,931.5	77%	6,907.3	51.45	101%	52.02	29.94	5.0%	33.01
<i>Pharmacy</i>									
Prescription Drugs/OTC Drugs	18,440.1	80%	14,760.6	\$56.56	86%	\$48.54	\$59.71	4.0%	\$64.58
<i>Ancillaries</i>									
Transportation	12,409.9	93%	11,583.4	\$3.81	100%	\$3.81	\$3.68	12.0%	\$4.62
DME, Home Health, Other Ancillary	15,888.0	79%	12,498.8	7.25	100%	7.25	7.56	10.0%	9.14
<i>Physician</i>									
Inpatient and Outpatient Surgery	1,745.1	79%	1,372.8	\$110.29	101%	\$111.58	\$12.76	5.0%	\$14.07
Office Visits/Consults	4,239.7	103%	4,380.9	30.82	105%	32.36	11.81	5.0%	13.02
Well Baby Exams/Physical Exams	30.0	100%	30.0	34.20	100%	34.20	0.09	5.0%	0.09
Hospital Inpatient Visits	516.5	93%	482.1	50.21	101%	50.88	2.04	5.0%	2.25
Emergency Room Visits	1,261.9	79%	1,001.2	48.34	101%	48.66	4.06	5.0%	4.48
Radiology/Pathology	4,394.9	93%	4,105.7	27.44	100%	27.44	9.39	10.0%	11.36
Outpatient Behavioral Health	1,196.9	60%	715.0	41.77	101%	42.04	2.51	4.0%	2.71
Clinic Visit	476.0	105%	499.8	82.72	100%	82.72	3.45	5.0%	3.80
Other Professional	9,708.5	160%	15,533.6	19.32	100%	19.32	25.02	4.0%	27.06
<b>Total PMPM</b>							\$212.42	3.8%	\$230.98

**State of Indiana**  
**Office of Medicaid Policy and Planning**  
**CY2007 Capitation Rate Development**  
**Package: A\B**  
**Population: Adult Females**  
**Non-MAU Eligible**  
**Low Rate Range**

4/25/2006  
 8:10 AM

Base Member Months: 936,235

<u>Category of Service</u>	<u>Base Util Rate Per 1,000</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per 1,000</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted PMPM</u>	<u>Trend</u>	<u>PMPM</u>
<b><i>Inpatient Hospital</i></b>									
Medical/Surgical	266.1	74%	196.1	\$1,141.66	98%	\$1,120.37	\$18.31	(1.0%)	\$17.94
Well Newborn	-	100%	-	0.00	100%	0.00	0.00	(1.0%)	0.00
Behavioral Health	80.3	54%	43.4	489.66	104%	508.02	1.84	4.0%	1.99
Other Inpatient	5.2	83%	4.3	685.30	97%	667.31	0.24	(1.0%)	0.24
<b><i>Outpatient Hospital</i></b>									
Emergency Room	1,305.3	68%	887.6	\$75.35	110%	\$82.89	\$6.13	5.0%	\$6.76
Other Outpatient	12,824.2	72%	9,233.4	40.51	103%	41.85	32.20	5.0%	35.50
<b><i>Pharmacy</i></b>									
Prescription Drugs/OTC Drugs	19,523.4	70%	13,690.8	\$43.79	98%	\$42.70	\$48.72	4.0%	\$52.69
<b><i>Ancillaries</i></b>									
Transportation	10,630.1	80%	8,504.1	\$3.72	100%	\$3.72	\$2.63	12.0%	\$3.30
DME, Home Health, Other Ancillary	10,161.3	76%	7,722.6	4.82	100%	4.82	3.10	10.0%	3.76
<b><i>Physician</i></b>									
Inpatient and Outpatient Surgery	3,169.0	76%	2,408.4	\$80.96	104%	\$83.79	\$16.82	5.0%	\$18.54
Office Visits/Consults	4,525.6	110%	4,978.1	29.81	115%	34.28	14.22	5.0%	15.68
Well Baby Exams/Physical Exams	152.1	105%	159.7	32.72	101%	33.04	0.44	5.0%	0.48
Hospital Inpatient Visits	708.5	80%	566.8	52.13	104%	54.21	2.56	5.0%	2.82
Emergency Room Visits	1,272.2	68%	865.1	49.12	102%	50.10	3.61	5.0%	3.98
Radiology/Pathology	9,282.6	90%	8,377.6	20.68	100%	20.68	14.44	10.0%	17.47
Outpatient Behavioral Health	1,430.7	51%	732.5	41.22	102%	42.04	2.57	4.0%	2.78
Clinic Visit	714.4	105%	750.1	78.89	100%	78.89	4.93	5.0%	5.44
Other Professional	11,356.5	175%	19,873.9	16.11	100%	16.11	26.69	4.0%	28.87
<b>Total PMPM</b>							\$199.45	4.1%	\$218.24

State of Indiana  
Office of Medicaid Policy and Planning  
CY2007 Capitation Rate Development  
Package: A\B  
Population: Adult Females  
Non-MAU Eligible  
High Rate Range

4/25/2006  
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Base Member Months: 936,235

<u>Category of Service</u>	<u>Base Util Rate Per 1,000</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per 1,000</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted PMPM</u>	<u>Trend</u>	<u>PMPM</u>
<i>Inpatient Hospital</i>									
Medical/Surgical	266.1	89%	236.8	\$1,141.66	96%	\$1,096.49	\$21.64	(1.0%)	\$21.21
Well Newborn	-	100%	-	0.00	100%	0.00	0.00	(1.0%)	0.00
Behavioral Health	80.3	66%	53.0	489.66	101%	495.77	2.19	4.0%	2.37
Other Inpatient	5.2	101%	5.3	685.30	96%	656.45	0.29	(1.0%)	0.28
<i>Outpatient Hospital</i>									
Emergency Room	1,305.3	79%	1,035.6	\$75.35	103%	\$77.86	\$6.72	5.0%	\$7.41
Other Outpatient	12,824.2	77%	9,917.7	40.51	101%	40.96	33.85	5.0%	37.32
<i>Pharmacy</i>									
Prescription Drugs/OTC Drugs	19,523.4	80%	15,627.8	\$43.79	86%	\$37.59	\$48.95	4.0%	\$52.94
<i>Ancillaries</i>									
Transportation	10,630.1	93%	9,922.1	\$3.72	100%	\$3.72	\$3.07	12.0%	\$3.85
DME, Home Health, Other Ancillary	10,161.3	79%	7,993.7	4.82	100%	4.82	3.21	10.0%	3.89
<i>Physician</i>									
Inpatient and Outpatient Surgery	3,169.0	79%	2,492.9	\$80.96	101%	\$81.90	\$17.01	5.0%	\$18.76
Office Visits/Consults	4,525.6	103%	4,676.3	29.81	105%	31.30	12.20	5.0%	13.45
Well Baby Exams/Physical Exams	152.1	100%	152.1	32.72	100%	32.72	0.41	5.0%	0.46
Hospital Inpatient Visits	708.5	93%	661.3	52.13	101%	52.82	2.91	5.0%	3.21
Emergency Room Visits	1,272.2	79%	1,009.4	49.12	101%	49.44	4.16	5.0%	4.59
Radiology/Pathology	9,282.6	93%	8,671.6	20.68	100%	20.68	14.95	10.0%	18.09
Outpatient Behavioral Health	1,430.7	60%	854.7	41.22	101%	41.49	2.96	4.0%	3.20
Clinic Visit	714.4	102%	726.3	78.89	100%	78.89	4.78	5.0%	5.26
Other Professional	11,356.5	175%	19,873.9	16.11	100%	16.11	26.69	4.0%	28.87
<b>Total PMPM</b>							\$205.99	4.0%	\$225.15

State of Indiana  
Office of Medicaid Policy and Planning  
CY2007 Capitation Rate Development  
Package: A\B  
Population: Maternity Payments  
Non-MAU Eligibles

4/25/2006  
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Base Deliveries(Inpatient Admission): 38,723

<u>Category of Service</u>	<u>Base Util Rate Per Delivery</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per Delivery</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted Cost Per Delivery</u>	<u>Trend</u>	<u>Cost Per Delivery</u>
<i>Inpatient Hospital</i>									
Maternity Delivery	2.4	100%	2.4	\$879.04	100%	\$879.04	\$2,129.00	3.0%	\$2,258.66
<i>Physician</i>									
Normal Deliveries	0.7	100%	0.7	\$687.62	100%	\$687.62	\$471.31	2.5%	\$495.17
Cesarean Deliveries	0.2	100%	0.2	774.92	100%	774.92	185.79	2.5%	195.19
Non-Deliveries	9.0	100%	9.0	32.06	100%	32.06	289.35	2.5%	304.00
<b>Total Cost Per Delivery</b>							\$3,075.45	2.8%	\$3,253.02

Base Deliveries(Physician Deliveries): 35,235

<u>Category of Service</u>	<u>Base Util Rate Per Delivery</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per Delivery</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted Cost Per Delivery</u>	<u>Trend</u>	<u>Cost Per Delivery</u>
<i>Inpatient Hospital</i>									
Maternity Delivery	2.7	100%	2.7	\$879.04	100%	\$879.04	\$2,339.77	3.0%	\$2,482.26
<i>Physician</i>									
Normal Deliveries	0.8	100%	0.8	\$687.62	100%	\$687.62	\$517.97	2.5%	\$544.19
Cesarean Deliveries	0.3	100%	0.3	774.92	100%	774.92	204.18	2.5%	214.52
Non-Deliveries	9.9	100%	9.9	32.06	100%	32.06	318.00	2.5%	334.10
<b>Total Cost Per Delivery</b>							\$3,379.92	2.8%	\$3,575.07

State of Indiana  
Office of Medicaid Policy and Planning  
CY2007 Capitation Rate Development  
Package: A\B  
Population: Newborns  
MAU Eligible  
Low Rate Range

4/25/2006  
8:10 AM

Base Member Months: 235

<u>Category of Service</u>	<u>Base Util Rate Per 1,000</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per 1,000</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted PMPM</u>	<u>Trend</u>	<u>PMPM</u>
<i>Inpatient Hospital</i>									
Medical/Surgical	6,240.9	68%	4,212.6	\$796.08	101%	\$804.04	\$282.26	3.6%	\$302.95
Well Newborn	-	63%	-	0.00	95%	0.00	0.00	3.6%	0.00
Behavioral Health	-	41%	-	0.00	102%	0.00	0.00	4.0%	0.00
Other Inpatient	100.3	55%	55.2	183.10	96%	175.68	0.81	3.6%	0.87
<i>Outpatient Hospital</i>									
Emergency Room	2,178.0	62%	1,342.2	\$56.19	108%	\$60.40	\$6.76	6.0%	\$7.59
Other Outpatient	33,699.0	76%	25,611.2	26.15	102%	26.58	56.73	6.0%	63.74
<i>Pharmacy</i>									
Prescription Drugs/OTC Drugs	8,928.9	93%	8,259.2	\$94.89	93%	\$88.22	\$60.72	12.0%	\$76.17
<i>Ancillaries</i>									
Transportation	61,686.9	95%	58,602.5	\$3.57	100%	\$3.57	\$17.42	3.0%	\$18.48
DME, Home Health, Other Ancillary	74,188.6	63%	47,017.0	19.16	100%	19.16	75.08	6.0%	84.36
<i>Physician</i>									
Inpatient and Outpatient Surgery	5,170.4	83%	4,285.0	\$63.07	102%	\$64.17	\$22.91	6.0%	\$25.75
Office Visits/Consults	5,829.0	103%	5,974.7	44.34	104%	46.00	22.90	6.0%	25.73
Well Baby Exams/Physical Exams	1,273.8	105%	1,337.5	33.02	101%	33.35	3.72	6.0%	4.18
Hospital Inpatient Visits	6,401.7	75%	4,801.3	69.44	105%	72.91	29.17	6.0%	32.78
Emergency Room Visits	1,256.3	54%	683.1	65.55	103%	67.35	3.83	6.0%	4.31
Radiology/Pathology	7,449.3	85%	6,331.9	14.60	100%	14.60	7.70	5.0%	8.49
Outpatient Behavioral Health	-	68%	-	0.00	101%	0.00	0.00	4.0%	0.00
Clinic Visit	1,968.6	108%	2,118.7	230.66	100%	230.66	40.72	5.0%	44.90
Other Professional	10,125.2	105%	10,631.5	104.88	100%	104.88	92.92	4.0%	100.50
<b>Total PMPM</b>							\$723.65	4.60%	\$800.78

**State of Indiana**  
**Office of Medicaid Policy and Planning**  
**CY2007 Capitation Rate Development**  
**Package: A\B**  
**Population: Newborns**  
**MAU Eligible**  
**High Rate Range**

4/25/2006  
 8:10 AM

**Base Member Months:** 235

<u>Category of Service</u>	<u>Base Util Rate Per 1,000</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per 1,000</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted PMPM</u>	<u>Trend</u>	<u>PMPM</u>
<b><i>Inpatient Hospital</i></b>									
Medical/Surgical	6,240.9	73%	4,524.8	\$796.08	100%	\$798.73	\$301.18	3.6%	\$323.25
Well Newborn	-	61%	-	0.00	95%	0.00	0.00	3.6%	0.00
Behavioral Health	-	45%	-	0.00	101%	0.00	0.00	4.0%	0.00
Other Inpatient	100.3	52%	51.8	183.10	95%	174.52	0.75	3.6%	0.81
<b><i>Outpatient Hospital</i></b>									
Emergency Room	2,178.0	69%	1,500.2	\$56.19	102%	\$57.59	\$7.20	6.0%	\$8.09
Other Outpatient	33,699.0	79%	26,510.3	26.15	101%	26.29	58.08	6.0%	65.26
<b><i>Pharmacy</i></b>									
Prescription Drugs/OTC Drugs	8,928.9	98%	8,705.9	\$94.89	88%	\$83.18	\$60.34	12.0%	\$75.69
<b><i>Ancillaries</i></b>									
Transportation	61,686.9	98%	60,659.8	\$3.57	100%	\$3.57	\$18.03	3.0%	\$19.13
DME, Home Health, Other Ancillary	74,188.6	64%	47,821.2	19.16	100%	19.16	76.37	6.0%	85.80
<b><i>Physician</i></b>									
Inpatient and Outpatient Surgery	5,170.4	84%	4,358.3	\$63.07	101%	\$63.43	\$23.04	6.0%	\$25.89
Office Visits/Consults	5,829.0	101%	5,877.5	44.34	101%	44.89	21.99	6.0%	24.70
Well Baby Exams/Physical Exams	1,273.8	102%	1,295.0	33.02	100%	33.13	3.57	6.0%	4.02
Hospital Inpatient Visits	6,401.7	92%	5,868.7	69.44	102%	70.60	34.53	6.0%	38.79
Emergency Room Visits	1,256.3	68%	855.9	65.55	101%	66.15	4.72	6.0%	5.30
Radiology/Pathology	7,449.3	85%	6,331.9	14.60	100%	14.60	7.70	5.0%	8.49
Outpatient Behavioral Health	-	73%	-	0.00	100%	0.00	0.00	4.0%	0.00
Clinic Visit	1,968.6	106%	2,084.2	230.66	100%	230.66	40.06	5.0%	44.17
Other Professional	10,125.2	105%	10,631.5	104.88	100%	104.88	92.92	4.0%	100.50
<b>Total PMPM</b>							\$749.72	4.62%	\$829.90



State of Indiana  
Office of Medicaid Policy and Planning  
CY2007 Capitation Rate Development  
Package: A\B  
Population: Preschoolers  
MAU Eligible  
Low Rate Range

4/25/2006  
8:10 AM

Base Member Months: 21,019

<u>Category of Service</u>	<u>Base Util Rate Per 1,000</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per 1,000</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted PMPM</u>	<u>Trend</u>	<u>PMPM</u>
<b><i>Inpatient Hospital</i></b>									
Medical/Surgical	789.4	74%	587.1	\$1,086.77	106%	\$1,155.37	\$56.53	3.6%	\$60.67
Well Newborn	-	100%	-	0.00	100%	0.00	0.00	(1.0%)	0.00
Behavioral Health	188.9	41%	77.7	471.48	102%	480.32	3.11	4.0%	3.36
Other Inpatient	5.5	101%	5.6	1,190.99	101%	1,205.88	0.56	(1.0%)	0.55
<b><i>Outpatient Hospital</i></b>									
Emergency Room	1,426.3	52%	741.7	\$75.78	110%	\$83.36	\$5.15	5.0%	\$5.68
Other Outpatient	15,897.1	70%	11,128.0	51.48	100%	51.48	47.74	5.0%	52.63
<b><i>Pharmacy</i></b>									
Prescription Drugs/OTC Drugs	17,152.6	68%	11,706.6	\$66.86	88%	\$58.61	\$57.17	4.0%	\$61.84
<b><i>Ancillaries</i></b>									
Transportation	72,524.2	90%	65,271.7	\$1.82	100%	\$1.82	\$9.88	12.0%	\$12.39
DME, Home Health, Other Ancillary	278,458.9	63%	176,473.3	3.05	100%	3.05	44.90	10.0%	54.33
<b><i>Physician</i></b>									
Inpatient and Outpatient Surgery	3,002.8	73%	2,195.8	\$89.82	102%	\$91.39	\$16.72	5.0%	\$18.44
Office Visits/Consults	6,087.2	103%	6,239.4	30.45	104%	31.59	16.42	5.0%	18.11
Well Baby Exams/Physical Exams	684.9	105%	719.2	32.90	101%	33.23	1.99	5.0%	2.20
Hospital Inpatient Visits	1,249.5	80%	999.6	53.31	104%	55.45	4.62	5.0%	5.09
Emergency Room Visits	1,373.6	54%	745.2	46.47	102%	47.52	2.95	5.0%	3.25
Radiology/Pathology	4,011.1	85%	3,409.5	14.33	100%	14.33	4.07	10.0%	4.93
Outpatient Behavioral Health	1,212.9	68%	818.7	53.69	101%	54.23	3.70	4.0%	4.00
Clinic Visit	603.1	108%	649.1	139.37	100%	139.37	7.54	5.0%	8.31
Other Professional	13,299.9	115%	15,294.9	25.01	100%	25.01	31.88	4.0%	34.48
<b>Total PMPM</b>							\$314.94	4.84%	\$350.27

**State of Indiana**  
**Office of Medicaid Policy and Planning**  
**CY2007 Capitation Rate Development**  
**Package: A\B**  
**Population: Preschoolers**  
**MAU Eligible**  
**High Rate Range**

4/25/2006  
 8:10 AM

Base Member Months: 21,019

<u>Category of Service</u>	<u>Base Util Rate Per 1,000</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per 1,000</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted PMPM</u>	<u>Trend</u>	<u>PMPM</u>
<b><i>Inpatient Hospital</i></b>									
Medical/Surgical	789.4	81%	643.1	\$1,086.77	105%	\$1,145.86	\$61.40	3.6%	\$65.90
Well Newborn	-	100%	-	0.00	100%	0.00	0.00	(1.0%)	0.00
Behavioral Health	188.9	45%	85.1	471.48	101%	474.43	3.36	4.0%	3.64
Other Inpatient	5.5	110%	6.1	1,190.99	100%	1,195.95	0.61	(1.0%)	0.60
<b><i>Outpatient Hospital</i></b>									
Emergency Room	1,426.3	61%	865.4	\$75.78	103%	\$78.30	\$5.65	5.0%	\$6.23
Other Outpatient	15,897.1	70%	11,128.0	51.48	100%	51.48	47.74	5.0%	52.63
<b><i>Pharmacy</i></b>									
Prescription Drugs/OTC Drugs	17,152.6	80%	13,722.1	\$66.86	85%	\$56.83	\$64.99	4.0%	\$70.29
<b><i>Ancillaries</i></b>									
Transportation	72,524.2	97%	70,109.1	\$1.82	100%	\$1.82	\$10.61	12.0%	\$13.31
DME, Home Health, Other Ancillary	278,458.9	64%	179,491.5	3.05	100%	3.05	45.67	10.0%	55.26
<b><i>Physician</i></b>									
Inpatient and Outpatient Surgery	3,002.8	74%	2,233.4	\$89.82	101%	\$90.34	\$16.81	5.0%	\$18.54
Office Visits/Consults	6,087.2	101%	6,137.9	30.45	101%	30.83	15.77	5.0%	17.38
Well Baby Exams/Physical Exams	684.9	102%	696.3	32.90	100%	33.01	1.92	5.0%	2.11
Hospital Inpatient Visits	1,249.5	93%	1,166.3	53.31	101%	54.02	5.25	5.0%	5.79
Emergency Room Visits	1,373.6	65%	889.5	46.47	101%	46.82	3.47	5.0%	3.83
Radiology/Pathology	4,011.1	85%	3,409.5	14.33	100%	14.33	4.07	10.0%	4.93
Outpatient Behavioral Health	1,212.9	73%	879.4	53.69	100%	53.87	3.95	4.0%	4.27
Clinic Visit	603.1	111%	668.9	139.37	100%	139.37	7.77	5.0%	8.57
Other Professional	13,299.9	115%	15,294.9	25.01	100%	25.01	31.88	4.0%	34.48
<b>Total PMPM</b>							\$330.31	4.89%	\$367.75

State of Indiana  
Office of Medicaid Policy and Planning  
CY2007 Capitation Rate Development  
Package: A\B  
Population: Children  
MAU Eligible  
Low Rate Range

4/25/2006  
8:10 AM

Base Member Months: 46,253

<u>Category of Service</u>	<u>Base Util Rate Per 1,000</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per 1,000</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted PMPM</u>	<u>Trend</u>	<u>PMPM</u>
<b><i>Inpatient Hospital</i></b>									
Medical/Surgical	225.1	90%	202.6	\$1,130.26	106%	\$1,198.64	\$20.24	3.6%	\$21.72
Well Newborn	-	100%	-	0.00	100%	0.00	0.00	(1.0%)	0.00
Behavioral Health	1,050.4	41%	432.0	470.34	102%	479.16	17.25	4.0%	18.66
Other Inpatient	3.4	68%	2.3	718.00	86%	616.40	0.12	(1.0%)	0.12
<b><i>Outpatient Hospital</i></b>									
Emergency Room	742.8	66%	487.5	\$76.89	106%	\$81.69	\$3.32	5.0%	\$3.66
Other Outpatient	7,227.1	65%	4,679.6	40.77	102%	41.78	16.29	5.0%	17.96
<b><i>Pharmacy</i></b>									
Prescription Drugs/OTC Drugs	20,238.7	78%	15,786.2	\$91.77	88%	\$80.45	\$105.83	4.0%	\$114.46
<b><i>Ancillaries</i></b>									
Transportation	38,116.6	90%	34,305.0	\$2.37	100%	\$2.37	\$6.77	12.0%	\$8.49
DME, Home Health, Other Ancillary	123,226.3	68%	84,102.0	2.31	100%	2.31	16.19	10.0%	19.59
<b><i>Physician</i></b>									
Inpatient and Outpatient Surgery	964.5	73%	705.3	\$78.52	102%	\$79.90	\$4.70	5.0%	\$5.18
Office Visits/Consults	3,904.6	108%	4,197.4	29.22	111%	32.50	11.37	5.0%	12.54
Well Baby Exams/Physical Exams	256.1	110%	281.7	33.61	102%	34.28	0.80	5.0%	0.89
Hospital Inpatient Visits	1,297.3	88%	1,135.1	43.80	103%	44.90	4.25	5.0%	4.68
Emergency Room Visits	700.6	66%	459.8	44.14	101%	44.69	1.71	5.0%	1.89
Radiology/Pathology	2,349.9	81%	1,897.6	14.47	100%	14.47	2.29	10.0%	2.77
Outpatient Behavioral Health	4,849.3	68%	3,273.3	44.52	101%	44.96	12.26	4.0%	13.27
Clinic Visit	369.5	142%	523.8	85.60	100%	85.60	3.74	5.0%	4.12
Other Professional	8,417.8	125%	10,522.3	16.89	100%	16.89	14.81	4.0%	16.02
<b>Total PMPM</b>							\$241.94	4.31%	\$266.01

State of Indiana  
Office of Medicaid Policy and Planning  
CY2007 Capitation Rate Development  
Package: A\B  
Population: Children  
MAU Eligible  
High Rate Range

4/25/2006  
8:10 AM

Base Member Months: 46,253

<u>Category of Service</u>	<u>Base Util Rate Per 1,000</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per 1,000</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted PMPM</u>	<u>Trend</u>	<u>PMPM</u>
<b><i>Inpatient Hospital</i></b>									
Medical/Surgical	225.1	97%	217.7	\$1,130.26	105%	\$1,190.73	\$21.60	3.6%	\$23.18
Well Newborn	-	100%	-	0.00	100%	0.00	0.00	(1.0%)	0.00
Behavioral Health	1,050.4	45%	473.1	470.34	101%	473.28	18.66	4.0%	20.18
Other Inpatient	3.4	73%	2.5	718.00	85%	612.33	0.13	(1.0%)	0.12
<b><i>Outpatient Hospital</i></b>									
Emergency Room	742.8	72%	533.9	\$76.89	102%	\$78.49	\$3.49	5.0%	\$3.85
Other Outpatient	7,227.1	68%	4,932.7	40.77	101%	41.10	16.90	5.0%	18.63
<b><i>Pharmacy</i></b>									
Prescription Drugs/OTC Drugs	20,238.7	87%	17,561.4	\$91.77	86%	\$78.82	\$115.35	4.0%	\$124.76
<b><i>Ancillaries</i></b>									
Transportation	38,116.6	97%	36,847.4	\$2.37	100%	\$2.37	\$7.27	12.0%	\$9.12
DME, Home Health, Other Ancillary	123,226.3	69%	85,540.3	2.31	100%	2.31	16.47	10.0%	19.93
<b><i>Physician</i></b>									
Inpatient and Outpatient Surgery	964.5	74%	717.3	\$78.52	101%	\$78.98	\$4.72	5.0%	\$5.21
Office Visits/Consults	3,904.6	102%	4,002.1	29.22	104%	30.31	10.11	5.0%	11.15
Well Baby Exams/Physical Exams	256.1	103%	264.7	33.61	101%	33.83	0.75	5.0%	0.82
Hospital Inpatient Visits	1,297.3	96%	1,243.3	43.80	101%	44.17	4.58	5.0%	5.05
Emergency Room Visits	700.6	72%	503.6	44.14	100%	44.32	1.86	5.0%	2.05
Radiology/Pathology	2,349.9	84%	1,964.2	14.47	100%	14.47	2.37	10.0%	2.87
Outpatient Behavioral Health	4,849.3	73%	3,515.8	44.52	100%	44.67	13.09	4.0%	14.15
Clinic Visit	369.5	137%	507.2	85.60	100%	85.60	3.62	5.0%	3.99
Other Professional	8,417.8	125%	10,522.3	16.89	100%	16.89	14.81	4.0%	16.02
<b>Total PMPM</b>							\$255.63	4.31%	\$281.07

**State of Indiana**  
**Office of Medicaid Policy and Planning**  
**CY2007 Capitation Rate Development**  
**Package: A\B**  
**Population: Adolescents**  
**MAU Eligible**  
**Low Rate Range**

4/25/2006  
 8:10 AM

Base Member Months: 31,584

<u>Category of Service</u>	<u>Base Util Rate Per 1,000</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per 1,000</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted PMPM</u>	<u>Trend</u>	<u>PMPM</u>
<i><b>Inpatient Hospital</b></i>									
Medical/Surgical	246.6	96%	237.3	\$1,168.75	101%	\$1,183.36	\$23.40	3.6%	\$25.12
Well Newborn	-	100%	-	0.00	100%	0.00	0.00	(1.0%)	0.00
Behavioral Health	744.4	41%	306.1	440.04	102%	448.29	11.44	4.0%	12.37
Other Inpatient	1.6	88%	1.4	1,246.35	86%	1,067.34	0.13	(1.0%)	0.12
<i><b>Outpatient Hospital</b></i>									
Emergency Room	1,035.9	66%	679.8	\$76.08	106%	\$80.84	\$4.58	5.0%	\$5.05
Other Outpatient	7,628.7	67%	5,073.1	35.30	102%	35.88	15.17	5.0%	16.72
<i><b>Pharmacy</b></i>									
Prescription Drugs/OTC Drugs	19,847.8	78%	15,481.3	\$92.21	88%	\$80.82	\$104.27	4.0%	\$112.78
<i><b>Ancillaries</b></i>									
Transportation	42,311.6	88%	37,022.6	\$2.02	100%	\$2.02	\$6.22	12.0%	\$7.80
DME, Home Health, Other Ancillary	57,099.1	73%	41,753.7	3.08	100%	3.08	10.71	10.0%	12.96
<i><b>Physician</b></i>									
Inpatient and Outpatient Surgery	1,110.3	73%	811.9	\$80.45	102%	\$81.86	\$5.54	5.0%	\$6.11
Office Visits/Consults	3,806.9	105%	3,997.3	28.98	108%	31.15	10.38	5.0%	11.44
Well Baby Exams/Physical Exams	214.5	103%	219.8	30.44	101%	30.59	0.56	5.0%	0.62
Hospital Inpatient Visits	978.0	90%	880.2	46.44	102%	47.37	3.47	5.0%	3.83
Emergency Room Visits	968.4	70%	677.9	47.49	101%	48.08	2.72	5.0%	2.99
Radiology/Pathology	3,404.2	83%	2,821.2	16.89	100%	16.89	3.97	10.0%	4.80
Outpatient Behavioral Health	4,260.7	68%	2,876.0	43.90	101%	44.34	10.63	4.0%	11.49
Clinic Visit	401.8	116%	464.1	88.21	100%	88.21	3.41	5.0%	3.76
Other Professional	6,896.6	140%	9,655.2	19.22	100%	19.22	15.46	4.0%	16.73
<b>Total PMPM</b>							\$232.06	4.23%	\$254.70

**State of Indiana**  
**Office of Medicaid Policy and Planning**  
**CY2007 Capitation Rate Development**  
**Package: A\B**  
**Population: Adolescents**  
**MAU Eligible**  
**High Rate Range**

4/25/2006  
 8:10 AM

Base Member Months: 31,584

<u>Category of Service</u>	<u>Base Util Rate Per 1,000</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per 1,000</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted PMPM</u>	<u>Trend</u>	<u>PMPM</u>
<i><b>Inpatient Hospital</b></i>									
Medical/Surgical	246.6	96%	236.3	\$1,168.75	100%	\$1,173.61	\$23.11	3.6%	\$24.81
Well Newborn	-	100%	-	0.00	100%	0.00	0.00	(1.0%)	0.00
Behavioral Health	744.4	45%	335.3	440.04	101%	442.78	12.37	4.0%	13.38
Other Inpatient	1.6	93%	1.5	1,246.35	85%	1,062.04	0.13	(1.0%)	0.13
<i><b>Outpatient Hospital</b></i>									
Emergency Room	1,035.9	72%	744.6	\$76.08	102%	\$77.67	\$4.82	5.0%	\$5.31
Other Outpatient	7,628.7	69%	5,251.2	35.30	101%	35.49	15.53	5.0%	17.12
<i><b>Pharmacy</b></i>									
Prescription Drugs/OTC Drugs	19,847.8	79%	15,746.1	\$92.21	86%	\$79.19	\$103.91	4.0%	\$112.39
<i><b>Ancillaries</b></i>									
Transportation	42,311.6	96%	40,550.3	\$2.02	100%	\$2.02	\$6.81	12.0%	\$8.55
DME, Home Health, Other Ancillary	57,099.1	74%	42,467.8	3.08	100%	3.08	10.89	10.0%	13.18
<i><b>Physician</b></i>									
Inpatient and Outpatient Surgery	1,110.3	74%	825.8	\$80.45	101%	\$80.92	\$5.57	5.0%	\$6.14
Office Visits/Consults	3,806.9	100%	3,806.9	28.98	100%	28.98	9.19	5.0%	10.13
Well Baby Exams/Physical Exams	214.5	100%	214.5	30.44	100%	30.44	0.54	5.0%	0.60
Hospital Inpatient Visits	978.0	97%	945.5	46.44	101%	46.75	3.68	5.0%	4.06
Emergency Room Visits	968.4	77%	742.5	47.49	100%	47.69	2.95	5.0%	3.25
Radiology/Pathology	3,404.2	84%	2,869.5	16.89	100%	16.89	4.04	10.0%	4.89
Outpatient Behavioral Health	4,260.7	73%	3,089.1	43.90	100%	44.04	11.34	4.0%	12.26
Clinic Visit	401.8	112%	449.4	88.21	100%	88.21	3.30	5.0%	3.64
Other Professional	6,896.6	140%	9,655.2	19.22	100%	19.22	15.46	4.0%	16.73
<b>Total PMPM</b>							\$233.54	4.27%	\$256.58

**State of Indiana**  
**Office of Medicaid Policy and Planning**  
**CY2007 Capitation Rate Development**  
**Package: A\B**  
**Population: Adult Males**  
**MAU Eligible**  
**Low Rate Range**

4/25/2006  
 8:10 AM

Base Member Months: 14,246

<u>Category of Service</u>	<u>Base Util Rate Per 1,000</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per 1,000</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted PMPM</u>	<u>Trend</u>	<u>PMPM</u>
<b><i>Inpatient Hospital</i></b>									
Medical/Surgical	526.8	92%	485.3	\$1,437.68	97%	\$1,387.99	\$56.13	(1.0%)	\$55.01
Well Newborn	-	100%	-	0.00	100%	0.00	0.00	(1.0%)	0.00
Behavioral Health	116.1	63%	73.2	450.22	102%	458.66	2.80	4.0%	3.02
Other Inpatient	24.2	96%	23.3	0.00	96%	0.00	0.00	(1.0%)	0.00
<b><i>Outpatient Hospital</i></b>									
Emergency Room	1,550.8	77%	1,186.4	\$76.89	105%	\$80.74	\$7.98	5.0%	\$8.80
Other Outpatient	12,111.1	76%	9,204.5	42.53	102%	43.23	33.16	5.0%	36.56
<b><i>Pharmacy</i></b>									
Prescription Drugs/OTC Drugs	33,343.8	78%	25,862.3	\$62.34	89%	\$55.33	\$119.24	4.0%	\$128.97
<b><i>Ancillaries</i></b>									
Transportation	20,519.9	90%	18,467.9	\$4.27	100%	\$4.27	\$6.57	12.0%	\$8.25
DME, Home Health, Other Ancillary	39,403.5	78%	30,734.7	7.35	100%	7.35	18.84	10.0%	22.79
<b><i>Physician</i></b>									
Inpatient and Outpatient Surgery	1,856.1	78%	1,447.7	\$116.01	102%	\$118.04	\$14.24	5.0%	\$15.70
Office Visits/Consults	5,479.6	105%	5,753.6	29.79	108%	32.03	15.36	5.0%	16.93
Well Baby Exams/Physical Exams	20.2	103%	20.7	33.07	101%	33.23	0.06	5.0%	0.06
Hospital Inpatient Visits	1,620.0	90%	1,458.0	39.72	102%	40.51	4.92	5.0%	5.43
Emergency Room Visits	1,567.2	77%	1,198.9	51.41	101%	51.93	5.19	5.0%	5.72
Radiology/Pathology	5,755.5	93%	5,331.0	25.84	100%	25.84	11.48	10.0%	13.89
Outpatient Behavioral Health	1,490.9	58%	858.7	48.26	101%	48.74	3.49	4.0%	3.77
Clinic Visit	670.6	108%	720.9	76.91	100%	76.91	4.62	5.0%	5.09
Other Professional	10,542.8	160%	16,868.4	19.15	100%	19.15	26.92	4.0%	29.12
<b>Total PMPM</b>							\$331.00	3.69%	\$359.12

**State of Indiana**  
**Office of Medicaid Policy and Planning**  
**CY2007 Capitation Rate Development**  
**Package: A\B**  
**Population: Adult Males**  
**MAU Eligible**  
**High Rate Range**

4/25/2006  
 8:10 AM

Base Member Months: 14,246

<u>Category of Service</u>	<u>Base Util Rate Per 1,000</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per 1,000</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted PMPM</u>	<u>Trend</u>	<u>PMPM</u>
<b><i>Inpatient Hospital</i></b>									
Medical/Surgical	526.8	95%	498.3	\$1,437.68	96%	\$1,373.19	\$57.02	(1.0%)	\$55.88
Well Newborn	-	100%	-	0.00	100%	0.00	0.00	(1.0%)	0.00
Behavioral Health	116.1	69%	80.1	450.22	101%	453.03	3.03	4.0%	3.27
Other Inpatient	24.2	105%	25.5	0.00	95%	0.00	0.00	(1.0%)	0.00
<b><i>Outpatient Hospital</i></b>									
Emergency Room	1,550.8	82%	1,274.3	\$76.89	102%	\$78.17	\$8.30	5.0%	\$9.15
Other Outpatient	12,111.1	79%	9,527.6	42.53	101%	42.76	33.95	5.0%	37.43
<b><i>Pharmacy</i></b>									
Prescription Drugs/OTC Drugs	33,343.8	83%	27,516.4	\$62.34	83%	\$51.69	\$118.53	4.0%	\$128.20
<b><i>Ancillaries</i></b>									
Transportation	20,519.9	97%	19,836.6	\$4.27	100%	\$4.27	\$7.06	12.0%	\$8.86
DME, Home Health, Other Ancillary	39,403.5	79%	31,260.3	7.35	100%	7.35	19.16	10.0%	23.18
<b><i>Physician</i></b>									
Inpatient and Outpatient Surgery	1,856.1	79%	1,472.5	\$116.01	101%	\$116.69	\$14.32	5.0%	\$15.79
Office Visits/Consults	5,479.6	102%	5,570.8	29.79	102%	30.54	14.18	5.0%	15.63
Well Baby Exams/Physical Exams	20.2	100%	20.2	33.07	100%	33.07	0.06	5.0%	0.06
Hospital Inpatient Visits	1,620.0	97%	1,566.1	39.72	101%	39.98	5.22	5.0%	5.75
Emergency Room Visits	1,567.2	82%	1,287.8	51.41	100%	51.58	5.54	5.0%	6.10
Radiology/Pathology	5,755.5	94%	5,422.2	25.84	100%	25.84	11.67	10.0%	14.13
Outpatient Behavioral Health	1,490.9	62%	922.4	48.26	100%	48.42	3.72	4.0%	4.03
Clinic Visit	670.6	102%	687.3	76.91	100%	76.91	4.41	5.0%	4.86
Other Professional	10,542.8	160%	16,868.4	19.15	100%	19.15	26.92	4.0%	29.12
<b>Total PMPM</b>							\$333.07	3.70%	\$361.44



**State of Indiana**  
**Office of Medicaid Policy and Planning**  
**CY2007 Capitation Rate Development**  
**Package: A\B**  
**Population: Adult Females**  
**MAU Eligible**  
**Low Rate Range**

4/25/2006  
 8:10 AM

Base Member Months: 71,766

<u>Category of Service</u>	<u>Base Util Rate Per 1,000</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per 1,000</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted PMPM</u>	<u>Trend</u>	<u>PMPM</u>
<b><i>Inpatient Hospital</i></b>									
Medical/Surgical	655.9	92%	602.5	\$1,090.27	97%	\$1,052.84	\$52.86	(1.0%)	\$51.81
Well Newborn	-	100%	-	0.00	100%	0.00	0.00	(1.0%)	0.00
Behavioral Health	278.4	63%	175.4	451.80	102%	460.27	6.73	4.0%	7.28
Other Inpatient	20.5	96%	19.8	1,324.73	96%	1,274.22	2.10	(1.0%)	2.06
<b><i>Outpatient Hospital</i></b>									
Emergency Room	1,870.7	77%	1,431.1	\$74.93	105%	\$78.68	\$9.38	5.0%	\$10.34
Other Outpatient	17,452.6	76%	13,264.0	40.34	102%	41.00	45.32	5.0%	49.97
<b><i>Pharmacy</i></b>									
Prescription Drugs/OTC Drugs	42,668.9	78%	33,095.0	\$60.69	89%	\$53.86	\$148.55	4.0%	\$160.67
<b><i>Ancillaries</i></b>									
Transportation	61,257.6	90%	55,131.8	\$2.59	100%	\$2.59	\$11.92	12.0%	\$14.95
DME, Home Health, Other Ancillary	46,697.8	78%	36,424.3	5.46	100%	5.46	16.57	10.0%	20.05
<b><i>Physician</i></b>									
Inpatient and Outpatient Surgery	2,580.1	78%	2,012.5	\$96.25	102%	\$97.94	\$16.43	5.0%	\$18.11
Office Visits/Consults	7,195.5	105%	7,555.2	30.15	108%	32.41	20.41	5.0%	22.50
Well Baby Exams/Physical Exams	155.1	103%	159.0	32.12	101%	32.28	0.43	5.0%	0.47
Hospital Inpatient Visits	1,347.7	90%	1,212.9	47.37	102%	48.32	4.88	5.0%	5.38
Emergency Room Visits	1,840.0	77%	1,407.6	51.99	101%	52.51	6.16	5.0%	6.79
Radiology/Pathology	8,734.2	93%	8,090.0	23.21	100%	23.21	15.65	10.0%	18.93
Outpatient Behavioral Health	4,045.6	58%	2,330.2	42.38	101%	42.81	8.31	4.0%	8.99
Clinic Visit	773.6	103%	792.9	83.23	100%	83.23	5.50	5.0%	6.06
Other Professional	13,502.3	175%	23,629.0	19.22	100%	19.22	37.85	4.0%	40.94
<b>Total PMPM</b>							\$409.04	3.85%	\$445.30

**State of Indiana**  
**Office of Medicaid Policy and Planning**  
**CY2007 Capitation Rate Development**  
**Package: A\B**  
**Population: Adult Females**  
**MAU Eligible**  
**High Rate Range**

4/25/2006  
 8:10 AM

Base Member Months: 71,766

<u>Category of Service</u>	<u>Base Util Rate Per 1,000</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per 1,000</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted PMPM</u>	<u>Trend</u>	<u>PMPM</u>
<b><i>Inpatient Hospital</i></b>									
Medical/Surgical	655.9	95%	619.9	\$1,090.27	96%	\$1,041.44	\$53.80	(1.0%)	\$52.73
Well Newborn	-	100%	-	0.00	100%	0.00	0.00	(1.0%)	0.00
Behavioral Health	278.4	69%	192.1	451.80	101%	454.62	7.28	4.0%	7.87
Other Inpatient	20.5	105%	21.6	1,324.73	95%	1,263.73	2.28	(1.0%)	2.23
<b><i>Outpatient Hospital</i></b>									
Emergency Room	1,870.7	82%	1,537.2	\$74.93	102%	\$76.18	\$9.76	5.0%	\$10.76
Other Outpatient	17,452.6	79%	13,729.6	40.34	101%	40.56	46.41	5.0%	51.16
<b><i>Pharmacy</i></b>									
Prescription Drugs/OTC Drugs	42,668.9	83%	35,211.8	\$60.69	83%	\$50.32	\$147.66	4.0%	\$159.71
<b><i>Ancillaries</i></b>									
Transportation	61,257.6	97%	59,217.7	\$2.59	100%	\$2.59	\$12.80	12.0%	\$16.06
DME, Home Health, Other Ancillary	46,697.8	79%	37,047.2	5.46	100%	5.46	16.85	10.0%	20.39
<b><i>Physician</i></b>									
Inpatient and Outpatient Surgery	2,580.1	79%	2,046.9	\$96.25	101%	\$96.82	\$16.51	5.0%	\$18.21
Office Visits/Consults	7,195.5	102%	7,315.3	30.15	102%	30.90	18.84	5.0%	20.77
Well Baby Exams/Physical Exams	155.1	100%	155.1	32.12	100%	32.12	0.42	5.0%	0.46
Hospital Inpatient Visits	1,347.7	97%	1,302.8	47.37	101%	47.68	5.18	5.0%	5.71
Emergency Room Visits	1,840.0	82%	1,511.9	51.99	100%	52.17	6.57	5.0%	7.25
Radiology/Pathology	8,734.2	94%	8,228.4	23.21	100%	23.21	15.91	10.0%	19.25
Outpatient Behavioral Health	4,045.6	62%	2,502.9	42.38	100%	42.53	8.87	4.0%	9.59
Clinic Visit	773.6	101%	780.0	83.23	100%	83.23	5.41	5.0%	5.96
Other Professional	13,502.3	175%	23,629.0	19.22	100%	19.22	37.85	4.0%	40.94
<b>Total PMPM</b>							\$410.11	4.11%	\$449.05

State of Indiana  
Office of Medicaid Policy and Planning  
CY2007 Capitation Rate Development  
Package: A/B  
Population: Maternity Payments  
MAU Eligibles

Base Deliveries(Inpatient Admission): 267

<u>Category of Service</u>	<u>Base Util Rate Per Delivery</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per Delivery</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted Cost Per Delivery</u>	<u>Trend</u>	<u>Cost Per Delivery</u>
<i>Inpatient Hospital</i>									
Maternity Delivery	2.4	100%	2.4	\$1,007.82	100%	\$1,007.82	\$2,393.40	3.0%	\$2,539.16
<i>Physician</i>									
Normal Deliveries	0.7	100%	0.7	\$690.50	100%	\$690.50	\$462.91	2.5%	\$486.34
Cesarean Deliveries	0.3	100%	0.3	739.61	100%	739.61	255.67	2.5%	268.61
Non-Deliveries	10.5	100%	10.5	32.91	100%	32.91	346.37	2.5%	363.91
<b>Total Cost Per Delivery</b>							\$3,458.35	2.8%	\$3,658.02

Base Deliveries(Physician Deliveries): 243

<u>Category of Service</u>	<u>Base Util Rate Per Delivery</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Util Rate Per Delivery</u>	<u>Base Cost Per Service</u>	<u>Managed Care Adjustment</u>	<u>Adjusted Cost Per Service</u>	<u>Adjusted Cost Per Delivery</u>	<u>Trend</u>	<u>Cost Per Delivery</u>
<i>Inpatient Hospital</i>									
Maternity Delivery	2.6	100%	2.6	\$1,007.82	100%	\$1,007.82	\$2,630.34	3.0%	\$2,790.53
<i>Physician</i>									
Normal Deliveries	0.7	100%	0.7	\$690.50	100%	\$690.50	\$508.74	2.5%	\$534.49
Cesarean Deliveries	0.4	100%	0.4	739.61	100%	739.61	280.98	2.5%	295.20
Non-Deliveries	11.6	100%	11.6	32.91	100%	32.91	380.66	2.5%	399.93
<b>Total Cost Per Delivery</b>							\$3,800.72	2.8%	\$4,020.16



**CONFIDENTIAL - FOR INTERNAL DISCUSSIONS ONLY**

## **ATTACHMENT 4**

State of Indiana  
Office of Medicaid Policy & Planning  
CY2007 Capitation Rates  
Non-MAU Population  
Low Rate Range

<b>Region:</b>	<b>Northwest</b>														
<b>Package:</b>	<b>AB</b>														
	<b>Projected</b>	<b>CY2007</b>	<b>Large</b>	<b>Foster</b>	<b>Physician</b>	<b>Total</b>			<b>Regional</b>	<b>Admin/</b>		<b>2007 Proposed</b>		<b>2006 Actual</b>	
	<b>2007</b>	<b>Adjusted</b>	<b>Claim</b>	<b>Children</b>	<b>Fee Schedule</b>	<b>Claim</b>	<b>TPL</b>	<b>Area</b>	<b>Adjusted</b>	<b>Profit/</b>	<b>2007 Proposed</b>	<b>Mental Health</b>	<b>Cap Rate</b>	<b>Cap Rate</b>	<b>% Change</b>
<b>Population</b>	<b>Enrollment</b>	<b>Claim Cost</b>	<b>Adjustment</b>	<b>Adjustment</b>	<b>Increase</b>	<b>Cost</b>	<b>Adjustment</b>	<b>Factor</b>	<b>Claim Cost</b>	<b>Surplus</b>	<b>Cap Rate</b>	<b>Carve In</b>	<b>Net of MH</b>	<b>Cap Rate</b>	<b>% Change</b>
Newborns	5,588	\$238.80	\$64.86	\$0.00	1.014	\$307.92	(1.70%)	0.944	\$285.74	\$48.46	\$334.20	\$0.04	\$334.16	\$328.88	1.6%
Preschoolers	20,263	59.91	4.42	0.00	1.019	65.53	(1.70%)	0.904	58.23	9.88	68.11	1.22	66.89	73.20	(8.6%)
Children	22,647	70.25	3.20	0.00	1.010	74.22	(1.70%)	0.904	65.95	11.18	77.13	6.29	70.84	75.62	(6.3%)
Adolescents	15,543	101.59	5.82	0.07	1.010	108.56	(1.70%)	0.904	96.47	16.36	112.83	6.36	106.47	107.96	(1.4%)
Adult Males	1,241	223.16	10.66	0.00	1.008	235.63	(1.70%)	0.997	230.85	39.15	270.00	4.01	265.99	251.95	5.6%
Adult Females	13,537	218.24	4.16	0.00	1.009	224.38	(1.70%)	0.997	219.83	37.28	257.11	3.94	253.17	227.23	11.4%
<b>Composite</b>	78,819	\$113.55	\$8.68	\$0.01	1.012	\$123.66	(1.70%)	0.924	\$114.59	\$19.43	\$134.02	\$4.12	\$129.91	\$128.15	1.4%
<b>Maternity Delivery Payment</b>	364	\$3,253.02	\$0.00	\$0.00	1.000	\$3,253.02	0.00%	1.002	\$3,258.49	\$171.50	\$3,429.99	\$0.00	\$3,429.99	\$3,441.37	(0.3%)

<b>Region:</b>	<b>North Central</b>														
<b>Package:</b>	<b>AB</b>														
	<b>Projected</b>	<b>CY2007</b>	<b>Large</b>	<b>Foster</b>	<b>Physician</b>	<b>Total</b>			<b>Regional</b>	<b>Admin/</b>		<b>2007 Proposed</b>		<b>2006 Actual</b>	
	<b>2007</b>	<b>Adjusted</b>	<b>Claim</b>	<b>Children</b>	<b>Fee Schedule</b>	<b>Claim</b>	<b>TPL</b>	<b>Area</b>	<b>Adjusted</b>	<b>Profit/</b>	<b>2007 Proposed</b>	<b>Mental Health</b>	<b>Cap Rate</b>	<b>Cap Rate</b>	<b>% Change</b>
<b>Population</b>	<b>Enrollment</b>	<b>Claim Cost</b>	<b>Adjustment</b>	<b>Adjustment</b>	<b>Increase</b>	<b>Cost</b>	<b>Adjustment</b>	<b>Factor</b>	<b>Claim Cost</b>	<b>Surplus</b>	<b>Cap Rate</b>	<b>Carve In</b>	<b>Net of MH</b>	<b>Cap Rate</b>	<b>% Change</b>
Newborns	4,608	\$238.80	\$64.86	\$0.00	1.014	\$307.92	(1.70%)	0.928	\$280.83	\$47.63	\$328.46	\$0.04	\$328.42	\$328.88	(0.1%)
Preschoolers	13,340	59.91	4.42	0.00	1.019	65.53	(1.70%)	0.994	64.05	10.86	74.91	1.34	73.57	73.20	0.5%
Children	13,886	70.25	3.20	0.00	1.010	74.22	(1.70%)	0.994	72.53	12.30	84.83	6.92	77.92	75.62	3.0%
Adolescents	9,678	101.59	5.82	0.07	1.010	108.56	(1.70%)	0.994	106.10	17.99	124.10	7.00	117.10	107.96	8.5%
Adult Males	791	223.16	10.66	0.00	1.008	235.63	(1.70%)	0.921	213.25	36.17	249.42	3.70	245.71	251.95	(2.5%)
Adult Females	6,780	218.24	4.16	0.00	1.009	224.38	(1.70%)	0.921	203.07	34.44	237.51	3.64	233.87	227.23	2.9%
<b>Composite</b>	49,083	\$112.35	\$10.09	\$0.01	1.013	\$123.91	(1.70%)	0.977	\$116.70	\$19.79	\$136.49	\$4.27	\$132.22	\$128.90	2.6%
<b>Maternity Delivery Payment</b>	81	\$3,253.02	\$0.00	\$0.00	1.000	\$3,253.02	0.00%	0.999	\$3,250.77	\$171.09	\$3,421.86	\$0.00	\$3,421.86	\$3,441.37	(0.6%)

<b>Region:</b>	<b>Northeast</b>														
<b>Package:</b>	<b>AB</b>														
	<b>Projected</b>	<b>CY2007</b>	<b>Large</b>	<b>Foster</b>	<b>Physician</b>	<b>Total</b>			<b>Regional</b>	<b>Admin/</b>		<b>2007 Proposed</b>		<b>2006 Actual</b>	
	<b>2007</b>	<b>Adjusted</b>	<b>Claim</b>	<b>Children</b>	<b>Fee Schedule</b>	<b>Claim</b>	<b>TPL</b>	<b>Area</b>	<b>Adjusted</b>	<b>Profit/</b>	<b>2007 Proposed</b>	<b>Mental Health</b>	<b>Cap Rate</b>	<b>Cap Rate</b>	<b>% Change</b>
<b>Population</b>	<b>Enrollment</b>	<b>Claim Cost</b>	<b>Adjustment</b>	<b>Adjustment</b>	<b>Increase</b>	<b>Cost</b>	<b>Adjustment</b>	<b>Factor</b>	<b>Claim Cost</b>	<b>Surplus</b>	<b>Cap Rate</b>	<b>Carve In</b>	<b>Net of MH</b>	<b>Cap Rate</b>	<b>% Change</b>
Newborns	4,771	\$238.80	\$64.86	\$0.00	1.014	\$307.92	(1.70%)	1.000	\$302.55	\$51.31	\$353.86	\$0.05	\$353.81	\$328.88	7.6%
Preschoolers	15,047	59.91	4.42	0.00	1.019	65.53	(1.70%)	1.001	64.47	10.93	75.40	1.35	74.05	73.20	1.2%
Children	16,062	70.25	3.20	0.00	1.010	74.22	(1.70%)	1.001	73.01	12.38	85.39	6.96	78.43	75.62	3.7%
Adolescents	10,860	101.59	5.82	0.07	1.010	108.56	(1.70%)	1.001	106.80	18.11	124.92	7.04	117.87	107.96	9.2%
Adult Males	1,014	223.16	10.66	0.00	1.008	235.63	(1.70%)	0.971	224.82	38.13	262.95	3.90	259.04	251.95	2.8%
Adult Females	7,311	218.24	4.16	0.00	1.009	224.38	(1.70%)	0.971	214.09	36.31	250.40	3.84	246.56	227.23	8.5%
<b>Composite</b>	55,065	\$110.67	\$9.66	\$0.01	1.013	\$121.77	(1.70%)	0.996	\$118.76	\$20.14	\$138.90	\$4.37	\$134.52	\$126.66	6.2%
<b>Maternity Delivery Payment</b>	133	\$3,253.02	\$0.00	\$0.00	1.000	\$3,253.02	0.00%	0.983	\$3,197.93	\$168.31	\$3,366.24	\$0.00	\$3,366.24	\$3,441.37	(2.2%)

State of Indiana  
Office of Medicaid Policy & Planning  
CY2007 Capitation Rates  
Non-MAU Population  
Low Rate Range

<b>Region:</b>	<b>West Central</b>														
<b>Package:</b>	<b>AB</b>														
	<b>Projected 2007</b>	<b>CY2007 Adjusted</b>	<b>Large Claim</b>	<b>Foster Children</b>	<b>Physician Fee Schedule</b>	<b>Total Claim</b>	<b>TPL</b>	<b>Area</b>	<b>Regional Adjusted</b>	<b>Admin/ Profit/</b>	<b>2007 Proposed</b>	<b>Mental Health</b>	<b>2007 Proposed Cap Rate</b>	<b>2006 Actual</b>	
<b>Population</b>	<b>Enrollment</b>	<b>Claim Cost</b>	<b>Adjustment</b>	<b>Adjustment</b>	<b>Increase</b>	<b>Cost</b>	<b>Adjustment</b>	<b>Factor</b>	<b>Claim Cost</b>	<b>Surplus</b>	<b>Cap Rate</b>	<b>Carve In</b>	<b>Net of MH</b>	<b>Cap Rate</b>	<b>% Change</b>
Newborns	3,144	\$238.80	\$64.86	\$0.00	1.014	\$307.92	(1.70%)	1.046	\$316.49	\$53.67	\$370.16	\$0.05	\$370.12	\$309.00	19.8%
Preschoolers	9,990	59.91	4.42	0.00	1.019	65.53	(1.70%)	1.048	67.48	11.44	78.92	1.41	77.51	82.37	(5.9%)
Children	10,781	70.25	3.20	0.00	1.010	74.22	(1.70%)	1.048	76.42	12.96	89.38	7.29	82.09	85.12	(3.6%)
Adolescents	7,859	101.59	5.82	0.07	1.010	108.56	(1.70%)	1.048	111.79	18.96	130.75	7.37	123.38	121.48	1.6%
Adult Males	837	223.16	10.66	0.00	1.008	235.63	(1.70%)	1.095	253.60	43.01	296.61	4.40	292.21	312.93	(6.6%)
Adult Females	5,074	218.24	4.16	0.00	1.009	224.38	(1.70%)	1.095	241.50	40.96	282.46	4.33	278.12	282.25	(1.5%)
<b>Composite</b>	37,685	\$111.43	\$9.51	\$0.01	1.013	\$122.38	(1.70%)	1.055	\$127.62	\$21.64	\$149.26	\$4.68	\$144.58	\$142.26	1.6%
<b>Maternity Delivery Payment</b>	115	\$3,253.02	\$0.00	\$0.00	1.000	\$3,253.02	0.00%	0.964	\$3,137.07	\$165.11	\$3,302.18	\$0.00	\$3,302.18	\$3,410.52	(3.2%)

<b>Region:</b>	<b>Central</b>														
<b>Package:</b>	<b>AB</b>														
	<b>Projected 2007</b>	<b>CY2007 Adjusted</b>	<b>Large Claim</b>	<b>Foster Children</b>	<b>Physician Fee Schedule</b>	<b>Total Claim</b>	<b>TPL</b>	<b>Area</b>	<b>Regional Adjusted</b>	<b>Admin/ Profit/</b>	<b>2007 Proposed</b>	<b>Mental Health</b>	<b>2007 Proposed Cap Rate</b>	<b>2006 Actual</b>	
<b>Population</b>	<b>Enrollment</b>	<b>Claim Cost</b>	<b>Adjustment</b>	<b>Adjustment</b>	<b>Increase</b>	<b>Cost</b>	<b>Adjustment</b>	<b>Factor</b>	<b>Claim Cost</b>	<b>Surplus</b>	<b>Cap Rate</b>	<b>Carve In</b>	<b>Net of MH</b>	<b>Cap Rate</b>	<b>% Change</b>
Newborns	12,159	\$238.80	\$64.86	\$0.00	1.014	\$307.92	(1.70%)	0.965	\$292.05	\$49.53	\$341.58	\$0.04	\$341.54	\$309.00	10.5%
Preschoolers	38,189	59.91	4.42	0.00	1.019	65.53	(1.70%)	0.942	60.66	10.29	70.95	1.27	69.68	82.37	(15.4%)
Children	39,597	70.25	3.20	0.00	1.010	74.22	(1.70%)	0.942	68.70	11.65	80.35	6.55	73.80	85.12	(13.3%)
Adolescents	28,771	101.59	5.82	0.07	1.010	108.56	(1.70%)	0.942	100.49	17.04	117.54	6.63	110.91	121.48	(8.7%)
Adult Males	2,242	223.16	10.66	0.00	1.008	235.63	(1.70%)	0.901	208.62	35.38	244.00	3.62	240.38	312.93	(23.2%)
Adult Females	22,036	218.24	4.16	0.00	1.009	224.38	(1.70%)	0.901	198.66	33.69	232.36	3.56	228.79	282.25	(18.9%)
<b>Composite</b>	142,994	\$113.33	\$9.56	\$0.01	1.013	\$124.35	(1.70%)	0.937	\$114.16	\$19.36	\$133.52	\$4.10	\$129.43	\$144.69	(10.5%)
<b>Maternity Delivery Payment</b>	689	\$3,253.02	\$0.00	\$0.00	1.000	\$3,253.02	0.00%	1.002	\$3,260.24	\$171.59	\$3,431.83	\$0.00	\$3,431.83	\$3,410.52	0.6%

<b>Region:</b>	<b>East Central</b>														
<b>Package:</b>	<b>AB</b>														
	<b>Projected 2007</b>	<b>CY2007 Adjusted</b>	<b>Large Claim</b>	<b>Foster Children</b>	<b>Physician Fee Schedule</b>	<b>Total Claim</b>	<b>TPL</b>	<b>Area</b>	<b>Regional Adjusted</b>	<b>Admin/ Profit/</b>	<b>2007 Proposed</b>	<b>Mental Health</b>	<b>2007 Proposed Cap Rate</b>	<b>2006 Actual</b>	
<b>Population</b>	<b>Enrollment</b>	<b>Claim Cost</b>	<b>Adjustment</b>	<b>Adjustment</b>	<b>Increase</b>	<b>Cost</b>	<b>Adjustment</b>	<b>Factor</b>	<b>Claim Cost</b>	<b>Surplus</b>	<b>Cap Rate</b>	<b>Carve In</b>	<b>Net of MH</b>	<b>Cap Rate</b>	<b>% Change</b>
Newborns	3,783	\$238.80	\$64.86	\$0.00	1.014	\$307.92	(1.70%)	1.065	\$322.45	\$54.68	\$377.13	\$0.05	\$377.08	\$309.00	22.0%
Preschoolers	12,242	59.91	4.42	0.00	1.019	65.53	(1.70%)	1.078	69.44	11.78	81.22	1.45	79.77	82.37	(3.2%)
Children	14,059	70.25	3.20	0.00	1.010	74.22	(1.70%)	1.078	78.64	13.34	91.98	7.50	84.48	85.12	(0.8%)
Adolescents	10,117	101.59	5.82	0.07	1.010	108.56	(1.70%)	1.078	115.04	19.51	134.55	7.59	126.97	121.48	4.5%
Adult Males	1,195	223.16	10.66	0.00	1.008	235.63	(1.70%)	1.076	249.18	42.26	291.44	4.33	287.11	312.93	(8.3%)
Adult Females	7,097	218.24	4.16	0.00	1.009	224.38	(1.70%)	1.076	237.29	40.24	277.53	4.26	273.28	282.25	(3.2%)
<b>Composite</b>	48,493	\$112.75	\$9.19	\$0.01	1.012	\$123.37	(1.70%)	1.077	\$130.35	\$22.11	\$152.46	\$4.86	\$147.60	\$143.94	2.5%
<b>Maternity Delivery Payment</b>	183	\$3,253.02	\$0.00	\$0.00	1.000	\$3,253.02	0.00%	1.002	\$3,259.94	\$171.58	\$3,431.51	\$0.00	\$3,431.51	\$3,410.52	0.6%

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<b>Region:</b>	<b>Southeast</b>														
<b>Package:</b>	<b>AB</b>														
	<b>Projected</b>	<b>CY2007</b>	<b>Large</b>	<b>Foster</b>	<b>Physician</b>	<b>Total</b>			<b>Regional</b>	<b>Admin/</b>			<b>2007 Proposed</b>	<b>2006 Actual</b>	
	<b>2007</b>	<b>Adjusted</b>	<b>Claim</b>	<b>Children</b>	<b>Fee Schedule</b>	<b>Claim</b>	<b>TPL</b>	<b>Area</b>	<b>Adjusted</b>	<b>Profit/</b>	<b>2007 Proposed</b>	<b>Mental Health</b>	<b>Cap Rate</b>	<b>Cap Rate</b>	<b>% Change</b>
<b>Population</b>	<b>Enrollment</b>	<b>Claim Cost</b>	<b>Adjustment</b>	<b>Adjustment</b>	<b>Increase</b>	<b>Cost</b>	<b>Adjustment</b>	<b>Factor</b>	<b>Claim Cost</b>	<b>Surplus</b>	<b>Cap Rate</b>	<b>Carve In</b>	<b>Net of MH</b>	<b>Cap Rate</b>	<b>% Change</b>
Newborns	3,661	\$238.80	\$64.86	\$0.00	1.014	\$307.92	(1.70%)	1.092	\$330.68	\$56.08	\$386.76	\$0.05	\$386.71	\$309.00	25.1%
Preschoolers	10,748	59.91	4.42	0.00	1.019	65.53	(1.70%)	1.081	69.61	11.81	81.42	1.45	79.96	82.37	(2.9%)
Children	12,265	70.25	3.20	0.00	1.010	74.22	(1.70%)	1.081	78.84	13.37	92.21	7.52	84.69	85.12	(0.5%)
Adolescents	8,727	101.59	5.82	0.07	1.010	108.56	(1.70%)	1.081	115.32	19.56	134.88	7.60	127.28	121.48	4.8%
Adult Males	732	223.16	10.66	0.00	1.008	235.63	(1.70%)	1.115	258.32	43.81	302.12	4.49	297.64	312.93	(4.9%)
Adult Females	5,281	218.24	4.16	0.00	1.009	224.38	(1.70%)	1.115	245.99	41.72	287.70	4.41	283.29	282.25	0.4%
<b>Composite</b>	41,414	\$110.64	\$9.77	\$0.01	1.013	\$121.86	(1.70%)	1.087	\$130.88	\$22.20	\$153.08	\$4.85	\$148.22	\$141.03	5.1%
<b>Maternity Delivery Payment</b>	80	\$3,253.02	\$0.00	\$0.00	1.000	\$3,253.02	0.00%	1.017	\$3,307.30	\$174.07	\$3,481.37	\$0.00	\$3,481.37	\$3,434.52	1.4%

<b>Region:</b>	<b>Southwest</b>														
<b>Package:</b>	<b>AB</b>														
	<b>Projected</b>	<b>CY2007</b>	<b>Large</b>	<b>Foster</b>	<b>Physician</b>	<b>Total</b>			<b>Regional</b>	<b>Admin/</b>			<b>2007 Proposed</b>	<b>2006 Actual</b>	
	<b>2007</b>	<b>Adjusted</b>	<b>Claim</b>	<b>Children</b>	<b>Fee Schedule</b>	<b>Claim</b>	<b>TPL</b>	<b>Area</b>	<b>Adjusted</b>	<b>Profit/</b>	<b>2007 Proposed</b>	<b>Mental Health</b>	<b>Cap Rate</b>	<b>Cap Rate</b>	<b>% Change</b>
<b>Population</b>	<b>Enrollment</b>	<b>Claim Cost</b>	<b>Adjustment</b>	<b>Adjustment</b>	<b>Increase</b>	<b>Cost</b>	<b>Adjustment</b>	<b>Factor</b>	<b>Claim Cost</b>	<b>Surplus</b>	<b>Cap Rate</b>	<b>Carve In</b>	<b>Net of MH</b>	<b>Cap Rate</b>	<b>% Change</b>
Newborns	4,315	\$238.80	\$64.86	\$0.00	1.014	\$307.92	(1.70%)	1.071	\$324.13	\$54.97	\$379.10	\$0.05	\$379.05	\$309.00	22.7%
Preschoolers	13,263	59.91	4.42	0.00	1.019	65.53	(1.70%)	1.135	73.14	12.40	85.54	1.53	84.01	82.37	2.0%
Children	14,955	70.25	3.20	0.00	1.010	74.22	(1.70%)	1.135	82.83	14.05	96.88	7.90	88.98	85.12	4.5%
Adolescents	10,517	101.59	5.82	0.07	1.010	108.56	(1.70%)	1.135	121.17	20.55	141.72	7.99	133.73	121.48	10.1%
Adult Males	990	223.16	10.66	0.00	1.008	235.63	(1.70%)	1.178	272.88	46.28	319.16	4.74	314.42	312.93	0.5%
Adult Females	6,992	218.24	4.16	0.00	1.009	224.38	(1.70%)	1.178	259.86	44.07	303.92	4.66	299.26	282.25	6.0%
<b>Composite</b>	51,032	\$111.52	\$9.55	\$0.01	1.013	\$122.50	(1.70%)	1.137	\$136.56	\$23.16	\$159.72	\$5.09	\$154.62	\$142.26	8.7%
<b>Maternity Delivery Payment</b>	204	\$3,253.02	\$0.00	\$0.00	1.000	\$3,253.02	0.00%	1.012	\$3,293.54	\$173.34	\$3,466.88	\$0.00	\$3,466.88	\$3,434.52	0.9%

<b>Region:</b>	<b>Statewide</b>														
<b>Package:</b>	<b>AB</b>														
	<b>Projected</b>	<b>CY2007</b>	<b>Large</b>	<b>Foster</b>	<b>Physician</b>	<b>Total</b>			<b>Regional</b>	<b>Admin/</b>			<b>2007 Proposed</b>	<b>2006 Actual</b>	
	<b>2007</b>	<b>Adjusted</b>	<b>Claim</b>	<b>Children</b>	<b>Fee Schedule</b>	<b>Claim</b>	<b>TPL</b>	<b>Area</b>	<b>Adjusted</b>	<b>Profit/</b>	<b>2007 Proposed</b>	<b>Mental Health</b>	<b>Cap Rate</b>	<b>Cap Rate</b>	<b>% Change</b>
<b>Population</b>	<b>Enrollment</b>	<b>Claim Cost</b>	<b>Adjustment</b>	<b>Adjustment</b>	<b>Increase</b>	<b>Cost</b>	<b>Adjustment</b>	<b>Factor</b>	<b>Claim Cost</b>	<b>Surplus</b>	<b>Cap Rate</b>	<b>Carve In</b>	<b>Net of MH</b>	<b>Cap Rate</b>	<b>% Change</b>
Newborns	42,029	\$238.80	\$64.86	\$0.00	1.014	\$307.92	(1.70%)	0.999	\$302.40	\$51.28	\$353.68	\$0.05	\$353.63	\$316.08	11.9%
Preschoolers	133,082	59.91	4.42	0.00	1.019	65.53	(1.70%)	0.999	64.35	10.91	75.26	1.34	73.91	79.02	(6.5%)
Children	144,252	70.25	3.20	0.00	1.010	74.22	(1.70%)	1.001	72.99	12.38	85.37	6.96	78.41	81.66	(4.0%)
Adolescents	102,072	101.59	5.82	0.07	1.010	108.56	(1.70%)	1.001	106.79	18.11	124.91	7.04	117.86	116.71	1.0%
Adult Males	9,042	223.16	10.66	0.00	1.008	235.63	(1.70%)	1.012	234.48	39.76	274.24	4.07	270.17	292.39	(7.6%)
Adult Females	74,108	218.24	4.16	0.00	1.009	224.38	(1.70%)	0.998	220.23	37.35	257.58	3.95	253.63	261.74	(3.1%)
<b>Composite</b>	504,585	\$112.38	\$9.46	\$0.01	1.013	\$123.29	(1.70%)	1.000	\$121.18	\$20.55	\$141.73	\$4.43	\$137.30	\$137.80	(0.4%)
<b>Maternity Delivery Payment</b>	1,849	\$3,253.02	\$0.00	\$0.00	1.000	\$3,253.02	0.00%	1.000	\$3,253.02	\$171.21	\$3,424.23	\$0.00	\$3,424.23	\$3,434.52	(0.3%)

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Region: Northwest  
Package: C

	Projected 2007	CY2007 Adjusted	Large Claim	Physician Fee Schedule	Total Claim	TPL	Area	Regional Adjusted	Admin/ Profit/	2007 Proposed	Mental Health	2007 Proposed	2006 Actual	
<u>Population</u>	<u>Enrollment</u>	<u>Claim Cost</u>	<u>Adjustment</u>	<u>Increase</u>	<u>Cost</u>	<u>Adjustment</u>	<u>Factor</u>	<u>Claim Cost</u>	<u>Surplus</u>	<u>Cap Rate</u>	<u>Carve In</u>	<u>Net of MH</u>	<u>Cap Rate</u>	<u>% Change</u>
Newborns	22	\$126.02	\$36.03	1.022	\$165.62	0.00%	1.000	\$165.62	\$28.09	\$193.70	\$0.00	\$193.70	\$182.83	5.9%
Preschoolers	608	71.94	1.80	1.021	75.30	0.00%	0.910	68.52	11.62	80.14	1.11	79.04	75.65	4.5%
Children	821	80.54	0.27	1.012	81.82	0.00%	0.910	74.45	12.63	87.08	6.60	80.48	70.41	14.3%
Adolescents	<u>585</u>	<u>100.16</u>	<u>10.13</u>	<u>1.011</u>	<u>111.50</u>	<u>0.00%</u>	<u>0.910</u>	<u>101.46</u>	<u>17.21</u>	<u>118.67</u>	<u>7.43</u>	<u>111.24</u>	<u>97.78</u>	<u>13.8%</u>
<b>Composite</b>	2,036	\$84.10	\$3.95	1.015	\$89.30	0.00%	0.911	\$81.43	\$13.81	\$95.24	\$5.13	\$90.11	\$81.05	11.2%

Region: North Central  
Package: C

	Projected 2007	CY2007 Adjusted	Large Claim	Physician Fee Schedule	Total Claim	TPL	Area	Regional Adjusted	Admin/ Profit/	2007 Proposed	Mental Health	2007 Proposed	2006 Actual	
<u>Population</u>	<u>Enrollment</u>	<u>Claim Cost</u>	<u>Adjustment</u>	<u>Increase</u>	<u>Cost</u>	<u>Adjustment</u>	<u>Factor</u>	<u>Claim Cost</u>	<u>Surplus</u>	<u>Cap Rate</u>	<u>Carve In</u>	<u>Net of MH</u>	<u>Cap Rate</u>	<u>% Change</u>
Newborns	22	\$126.02	\$36.03	1.022	\$165.62	0.00%	1.000	\$165.62	\$28.09	\$193.70	\$0.00	\$193.70	\$182.83	5.9%
Preschoolers	610	71.94	1.80	1.021	75.30	0.00%	0.990	74.51	12.64	87.15	1.20	85.95	75.65	13.6%
Children	725	80.54	0.27	1.012	81.82	0.00%	0.990	80.96	13.73	94.69	7.18	87.51	70.41	24.3%
Adolescents	<u>462</u>	<u>100.16</u>	<u>10.13</u>	<u>1.011</u>	<u>111.50</u>	<u>0.00%</u>	<u>0.990</u>	<u>110.33</u>	<u>18.71</u>	<u>129.04</u>	<u>8.08</u>	<u>120.96</u>	<u>97.78</u>	<u>23.7%</u>
<b>Composite</b>	1,819	\$83.19	\$3.72	1.015	\$88.18	0.00%	0.990	\$87.28	\$14.80	\$102.08	\$5.32	\$96.77	\$80.48	20.2%

Region: Northeast  
Package: C

	Projected 2007	CY2007 Adjusted	Large Claim	Physician Fee Schedule	Total Claim	TPL	Area	Regional Adjusted	Admin/ Profit/	2007 Proposed	Mental Health	2007 Proposed	2006 Actual	
<u>Population</u>	<u>Enrollment</u>	<u>Claim Cost</u>	<u>Adjustment</u>	<u>Increase</u>	<u>Cost</u>	<u>Adjustment</u>	<u>Factor</u>	<u>Claim Cost</u>	<u>Surplus</u>	<u>Cap Rate</u>	<u>Carve In</u>	<u>Net of MH</u>	<u>Cap Rate</u>	<u>% Change</u>
Newborns	25	\$126.02	\$36.03	1.022	\$165.62	0.00%	1.000	\$165.62	\$28.09	\$193.70	\$0.00	\$193.70	\$182.83	5.9%
Preschoolers	682	71.94	1.80	1.021	75.30	0.00%	0.987	74.32	12.60	86.92	1.20	85.72	75.65	13.3%
Children	850	80.54	0.27	1.012	81.82	0.00%	0.987	80.75	13.69	94.44	7.16	87.28	70.41	24.0%
Adolescents	<u>584</u>	<u>100.16</u>	<u>10.13</u>	<u>1.011</u>	<u>111.50</u>	<u>0.00%</u>	<u>0.987</u>	<u>110.04</u>	<u>18.66</u>	<u>128.70</u>	<u>8.06</u>	<u>120.64</u>	<u>97.78</u>	<u>23.4%</u>
<b>Composite</b>	2,141	\$83.68	\$3.86	1.015	\$88.81	0.00%	0.987	\$87.68	\$14.87	\$102.55	\$5.42	\$97.13	\$80.86	20.1%



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Region: West Central  
Package: C

	Projected 2007	CY2007 Adjusted	Large Claim	Physician Fee Schedule	Total Claim	TPL	Area	Regional Adjusted	Admin/ Profit/	2007 Proposed	Mental Health	2007 Proposed	2006 Actual	
<u>Population</u>	<u>Enrollment</u>	<u>Claim Cost</u>	<u>Adjustment</u>	<u>Increase</u>	<u>Cost</u>	<u>Adjustment</u>	<u>Factor</u>	<u>Claim Cost</u>	<u>Surplus</u>	<u>Cap Rate</u>	<u>Carve In</u>	<u>Net of MH</u>	<u>Cap Rate</u>	<u>% Change</u>
Newborns	11	\$126.02	\$36.03	1.022	\$165.62	0.00%	1.000	\$165.62	\$28.09	\$193.70	\$0.00	\$193.70	\$170.53	13.6%
Preschoolers	385	71.94	1.80	1.021	75.30	0.00%	1.028	77.38	13.12	90.51	1.25	89.26	80.12	11.4%
Children	530	80.54	0.27	1.012	81.82	0.00%	1.028	84.08	14.26	98.34	7.45	90.89	74.62	21.8%
Adolescents	450	100.16	10.13	1.011	111.50	0.00%	1.028	114.58	19.43	134.01	8.39	125.62	103.49	21.4%
<b>Composite</b>	1,376	\$84.91	\$4.21	1.014	\$90.37	0.00%	1.027	\$92.83	\$15.74	\$108.58	\$5.97	\$102.61	\$86.36	18.8%

Region: Central  
Package: C

	Projected 2007	CY2007 Adjusted	Large Claim	Physician Fee Schedule	Total Claim	TPL	Area	Regional Adjusted	Admin/ Profit/	2007 Proposed	Mental Health	2007 Proposed	2006 Actual	
<u>Population</u>	<u>Enrollment</u>	<u>Claim Cost</u>	<u>Adjustment</u>	<u>Increase</u>	<u>Cost</u>	<u>Adjustment</u>	<u>Factor</u>	<u>Claim Cost</u>	<u>Surplus</u>	<u>Cap Rate</u>	<u>Carve In</u>	<u>Net of MH</u>	<u>Cap Rate</u>	<u>% Change</u>
Newborns	51	\$126.02	\$36.03	1.022	\$165.62	0.00%	1.000	\$165.62	\$28.09	\$193.70	\$0.00	\$193.70	\$170.53	13.6%
Preschoolers	1,517	71.94	1.80	1.021	75.30	0.00%	0.954	71.83	12.18	84.01	1.16	82.86	80.12	3.4%
Children	1,813	80.54	0.27	1.012	81.82	0.00%	0.954	78.05	13.24	91.28	6.92	84.36	74.62	13.1%
Adolescents	1,171	100.16	10.13	1.011	111.50	0.00%	0.954	106.36	18.04	124.40	7.79	116.61	103.49	12.7%
<b>Composite</b>	4,552	\$83.23	\$3.72	1.015	\$88.22	0.00%	0.954	\$84.24	\$14.29	\$98.53	\$5.15	\$93.38	\$84.95	9.9%

Region: East Central  
Package: C

	Projected 2007	CY2007 Adjusted	Large Claim	Physician Fee Schedule	Total Claim	TPL	Area	Regional Adjusted	Admin/ Profit/	2007 Proposed	Mental Health	2007 Proposed	2006 Actual	
<u>Population</u>	<u>Enrollment</u>	<u>Claim Cost</u>	<u>Adjustment</u>	<u>Increase</u>	<u>Cost</u>	<u>Adjustment</u>	<u>Factor</u>	<u>Claim Cost</u>	<u>Surplus</u>	<u>Cap Rate</u>	<u>Carve In</u>	<u>Net of MH</u>	<u>Cap Rate</u>	<u>% Change</u>
Newborns	13	\$126.02	\$36.03	1.022	\$165.62	0.00%	1.000	\$165.62	\$28.09	\$193.70	\$0.00	\$193.70	\$170.53	13.6%
Preschoolers	441	71.94	1.80	1.021	75.30	0.00%	1.049	78.96	13.39	92.35	1.27	91.07	80.12	13.7%
Children	627	80.54	0.27	1.012	81.82	0.00%	1.049	85.79	14.55	100.34	7.60	92.73	74.62	24.3%
Adolescents	387	100.16	10.13	1.011	111.50	0.00%	1.049	116.91	19.83	136.74	8.56	128.17	103.49	23.9%
<b>Composite</b>	1,468	\$83.53	\$3.65	1.015	\$88.42	0.00%	1.048	\$92.65	\$15.71	\$108.36	\$5.89	\$102.47	\$84.73	20.9%

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Region: Southeast  
Package: C

	Projected 2007	CY2007 Adjusted	Large Claim	Physician Fee Schedule	Total Claim	TPL	Area	Regional Adjusted	Admin/ Profit/	2007 Proposed	Mental Health	2007 Proposed	2006 Actual	
<u>Population</u>	<u>Enrollment</u>	<u>Claim Cost</u>	<u>Adjustment</u>	<u>Increase</u>	<u>Cost</u>	<u>Adjustment</u>	<u>Factor</u>	<u>Claim Cost</u>	<u>Surplus</u>	<u>Cap Rate</u>	<u>Carve In</u>	<u>Net of MH</u>	<u>Cap Rate</u>	<u>% Change</u>
Newborns	21	\$126.02	\$36.03	1.022	\$165.62	0.00%	1.000	\$165.62	\$28.09	\$193.70	\$0.00	\$193.70	\$171.58	12.9%
Preschoolers	459	71.94	1.80	1.021	75.30	0.00%	1.063	80.06	13.58	93.63	1.29	92.34	80.19	15.2%
Children	646	80.54	0.27	1.012	81.82	0.00%	1.063	86.98	14.75	101.73	7.71	94.02	74.51	26.2%
Adolescents	452	100.16	10.13	1.011	111.50	0.00%	1.063	118.54	20.10	138.64	8.68	129.96	103.40	25.7%
<b>Composite</b>	1,578	\$84.26	\$4.01	1.015	\$89.54	0.00%	1.062	\$95.05	\$16.12	\$111.17	\$6.02	\$105.15	\$85.73	22.7%

Region: Southwest  
Package: C

	Projected 2007	CY2007 Adjusted	Large Claim	Physician Fee Schedule	Total Claim	TPL	Area	Regional Adjusted	Admin/ Profit/	2007 Proposed	Mental Health	2007 Proposed	2006 Actual	
<u>Population</u>	<u>Enrollment</u>	<u>Claim Cost</u>	<u>Adjustment</u>	<u>Increase</u>	<u>Cost</u>	<u>Adjustment</u>	<u>Factor</u>	<u>Claim Cost</u>	<u>Surplus</u>	<u>Cap Rate</u>	<u>Carve In</u>	<u>Net of MH</u>	<u>Cap Rate</u>	<u>% Change</u>
Newborns	24	\$126.02	\$36.03	1.022	\$165.62	0.00%	1.000	\$165.62	\$28.09	\$193.70	\$0.00	\$193.70	\$171.58	12.9%
Preschoolers	632	71.94	1.80	1.021	75.30	0.00%	1.110	83.57	14.17	97.74	1.35	96.39	80.19	20.2%
Children	810	80.54	0.27	1.012	81.82	0.00%	1.110	90.80	15.40	106.20	8.05	98.15	74.51	31.7%
Adolescents	568	100.16	10.13	1.011	111.50	0.00%	1.110	123.74	20.98	144.72	9.07	135.66	103.40	31.2%
<b>Composite</b>	2,034	\$83.88	\$3.92	1.015	\$89.07	0.00%	1.109	\$98.63	\$16.73	\$115.36	\$6.16	\$109.20	\$85.49	27.7%

Region: Statewide  
Package: C

	Projected 2007	CY2007 Adjusted	Large Claim	Physician Fee Schedule	Total Claim	TPL	Area	Regional Adjusted	Admin/ Profit/	2007 Proposed	Mental Health	2007 Proposed	2006 Actual	
<u>Population</u>	<u>Enrollment</u>	<u>Claim Cost</u>	<u>Adjustment</u>	<u>Increase</u>	<u>Cost</u>	<u>Adjustment</u>	<u>Factor</u>	<u>Claim Cost</u>	<u>Surplus</u>	<u>Cap Rate</u>	<u>Carve In</u>	<u>Net of MH</u>	<u>Cap Rate</u>	<u>% Change</u>
Newborns	189	\$126.02	\$36.03	1.022	\$165.62	0.00%	1.000	\$165.62	\$28.09	\$193.70	\$0.00	\$193.70	\$175.27	10.5%
Preschoolers	5,334	71.94	1.80	1.021	75.30	0.00%	0.998	75.17	12.75	87.91	1.21	86.70	78.54	10.4%
Children	6,822	80.54	0.27	1.012	81.82	0.00%	1.000	81.80	13.87	95.67	7.25	88.42	73.12	20.9%
Adolescents	4,659	100.16	10.13	1.011	111.50	0.00%	1.001	111.57	18.92	130.49	8.17	122.32	101.47	20.6%
<b>Composite</b>	17,004	\$83.72	\$3.85	1.015	\$88.84	0.00%	1.000	\$88.81	\$15.06	\$103.87	\$5.53	\$98.34	\$83.72	17.5%

State of Indiana  
Office of Medicaid Policy & Planning  
CY2007 Capitation Rates  
Non-MAU Population  
High Rate Range

<b>Region:</b>	<b>Northwest</b>														
<b>Package:</b>	<b>AB</b>														
	<b>Projected</b>	<b>CY2007</b>	<b>Large</b>	<b>Foster</b>	<b>Physician</b>	<b>Total</b>			<b>Regional</b>	<b>Admin/</b>		<b>2007 Proposed</b>		<b>2006 Actual</b>	
	<b>2007</b>	<b>Adjusted</b>	<b>Claim</b>	<b>Children</b>	<b>Fee Schedule</b>	<b>Claim</b>	<b>TPL</b>	<b>Area</b>	<b>Adjusted</b>	<b>Profit/</b>	<b>2007 Proposed</b>	<b>Mental Health</b>	<b>Cap Rate</b>	<b>Cap Rate</b>	<b>% Change</b>
<b>Population</b>	<b>Enrollment</b>	<b>Claim Cost</b>	<b>Adjustment</b>	<b>Adjustment</b>	<b>Increase</b>	<b>Cost</b>	<b>Adjustment</b>	<b>Factor</b>	<b>Claim Cost</b>	<b>Surplus</b>	<b>Cap Rate</b>	<b>Carve In</b>	<b>Net of MH</b>	<b>Cap Rate</b>	<b>% Change</b>
Newborns	5,588	\$254.90	\$78.76	\$0.00	1.014	\$338.33	(1.70%)	0.944	\$313.96	\$53.25	\$367.21	\$0.05	\$367.16	\$328.88	11.6%
Preschoolers	20,263	63.83	5.36	0.00	1.019	70.50	(1.70%)	0.904	62.64	10.62	73.27	1.38	71.88	73.20	(1.8%)
Children	22,647	73.44	3.88	0.00	1.010	78.13	(1.70%)	0.904	69.43	11.77	81.20	7.23	73.97	75.62	(2.2%)
Adolescents	15,543	103.34	7.06	0.07	1.010	111.59	(1.70%)	0.904	99.16	16.82	115.98	7.33	108.64	107.96	0.6%
Adult Males	1,241	230.98	12.95	0.00	1.008	245.80	(1.70%)	0.997	240.82	40.84	281.66	4.55	277.11	251.95	10.0%
Adult Females	13,537	225.15	5.06	0.00	1.009	232.25	(1.70%)	0.997	227.54	38.59	266.13	3.94	262.19	227.23	15.4%
<b>Composite</b>	78,819	\$118.27	\$10.54	\$0.01	1.012	\$130.32	(1.70%)	0.924	\$120.74	\$20.48	\$141.21	\$4.63	\$136.58	\$128.15	6.6%
<b>Maternity Delivery Payment</b>	364	\$3,575.07	\$0.00	\$0.00	1.000	\$3,575.07	0.00%	1.002	\$3,581.08	\$188.48	\$3,769.56	\$0.00	\$3,769.56	\$3,441.37	9.5%

<b>Region:</b>	<b>North Central</b>														
<b>Package:</b>	<b>AB</b>														
	<b>Projected</b>	<b>CY2007</b>	<b>Large</b>	<b>Foster</b>	<b>Physician</b>	<b>Total</b>			<b>Regional</b>	<b>Admin/</b>		<b>2007 Proposed</b>		<b>2006 Actual</b>	
	<b>2007</b>	<b>Adjusted</b>	<b>Claim</b>	<b>Children</b>	<b>Fee Schedule</b>	<b>Claim</b>	<b>TPL</b>	<b>Area</b>	<b>Adjusted</b>	<b>Profit/</b>	<b>2007 Proposed</b>	<b>Mental Health</b>	<b>Cap Rate</b>	<b>Cap Rate</b>	<b>% Change</b>
<b>Population</b>	<b>Enrollment</b>	<b>Claim Cost</b>	<b>Adjustment</b>	<b>Adjustment</b>	<b>Increase</b>	<b>Cost</b>	<b>Adjustment</b>	<b>Factor</b>	<b>Claim Cost</b>	<b>Surplus</b>	<b>Cap Rate</b>	<b>Carve In</b>	<b>Net of MH</b>	<b>Cap Rate</b>	<b>% Change</b>
Newborns	4,608	\$254.90	\$78.76	\$0.00	1.014	\$338.33	(1.70%)	0.928	\$308.57	\$52.33	\$360.90	\$0.05	\$360.85	\$328.88	9.7%
Preschoolers	13,340	63.83	5.36	0.00	1.019	70.50	(1.70%)	0.994	68.90	11.68	80.58	1.52	79.06	73.20	8.0%
Children	13,886	73.44	3.88	0.00	1.010	78.13	(1.70%)	0.994	76.36	12.95	89.31	7.95	81.36	75.62	7.6%
Adolescents	9,678	103.34	7.06	0.07	1.010	111.59	(1.70%)	0.994	109.06	18.50	127.56	8.06	119.49	107.96	10.7%
Adult Males	791	230.98	12.95	0.00	1.008	245.80	(1.70%)	0.921	222.46	37.73	260.19	4.20	255.98	251.95	1.6%
Adult Females	6,780	225.15	5.06	0.00	1.009	232.25	(1.70%)	0.921	210.20	35.65	245.84	3.64	242.20	227.23	6.6%
<b>Composite</b>	49,083	\$117.26	\$12.25	\$0.01	1.013	\$131.07	(1.70%)	0.977	\$123.42	\$20.93	\$144.35	\$4.83	\$139.52	\$128.90	8.2%
<b>Maternity Delivery Payment</b>	81	\$3,575.07	\$0.00	\$0.00	1.000	\$3,575.07	0.00%	0.999	\$3,572.59	\$188.03	\$3,760.62	\$0.00	\$3,760.62	\$3,441.37	9.3%

<b>Region:</b>	<b>Northeast</b>														
<b>Package:</b>	<b>AB</b>														
	<b>Projected</b>	<b>CY2007</b>	<b>Large</b>	<b>Foster</b>	<b>Physician</b>	<b>Total</b>			<b>Regional</b>	<b>Admin/</b>		<b>2007 Proposed</b>		<b>2006 Actual</b>	
	<b>2007</b>	<b>Adjusted</b>	<b>Claim</b>	<b>Children</b>	<b>Fee Schedule</b>	<b>Claim</b>	<b>TPL</b>	<b>Area</b>	<b>Adjusted</b>	<b>Profit/</b>	<b>2007 Proposed</b>	<b>Mental Health</b>	<b>Cap Rate</b>	<b>Cap Rate</b>	<b>% Change</b>
<b>Population</b>	<b>Enrollment</b>	<b>Claim Cost</b>	<b>Adjustment</b>	<b>Adjustment</b>	<b>Increase</b>	<b>Cost</b>	<b>Adjustment</b>	<b>Factor</b>	<b>Claim Cost</b>	<b>Surplus</b>	<b>Cap Rate</b>	<b>Carve In</b>	<b>Net of MH</b>	<b>Cap Rate</b>	<b>% Change</b>
Newborns	4,771	\$254.90	\$78.76	\$0.00	1.014	\$338.33	(1.70%)	1.000	\$332.43	\$56.38	\$388.81	\$0.05	\$388.76	\$328.88	18.2%
Preschoolers	15,047	63.83	5.36	0.00	1.019	70.50	(1.70%)	1.001	69.35	11.76	81.12	1.53	79.58	73.20	8.7%
Children	16,062	73.44	3.88	0.00	1.010	78.13	(1.70%)	1.001	76.86	13.04	89.90	8.00	81.90	75.62	8.3%
Adolescents	10,860	103.34	7.06	0.07	1.010	111.59	(1.70%)	1.001	109.78	18.62	128.40	8.12	120.28	107.96	11.4%
Adult Males	1,014	230.98	12.95	0.00	1.008	245.80	(1.70%)	0.971	234.53	39.77	274.30	4.43	269.87	251.95	7.1%
Adult Females	7,311	225.15	5.06	0.00	1.009	232.25	(1.70%)	0.971	221.60	37.58	259.18	3.84	255.34	227.23	12.4%
<b>Composite</b>	55,065	\$115.48	\$11.73	\$0.01	1.013	\$128.74	(1.70%)	0.996	\$125.57	\$21.29	\$146.86	\$4.95	\$141.91	\$126.66	12.0%
<b>Maternity Delivery Payment</b>	133	\$3,575.07	\$0.00	\$0.00	1.000	\$3,575.07	0.00%	0.983	\$3,514.52	\$184.97	\$3,699.50	\$0.00	\$3,699.50	\$3,441.37	7.5%

State of Indiana  
Office of Medicaid Policy & Planning  
CY2007 Capitation Rates  
Non-MAU Population  
High Rate Range

Region: West Central  
Package: AB

	Projected 2007	CY2007 Adjusted	Large Claim	Foster Children	Physician Fee Schedule	Total Claim	TPL	Area	Regional Adjusted	Admin/ Profit/	2007 Proposed	Mental Health	2007 Proposed	2006 Actual	
	Enrollment	Claim Cost	Adjustment	Adjustment	Increase	Cost	Adjustment	Factor	Claim Cost	Surplus	Cap Rate	Carve In	Cap Rate	Cap Rate	% Change
Population															
Newborns	3,144	\$254.90	\$78.76	\$0.00	1.014	\$338.33	(1.70%)	1.046	\$347.75	\$58.98	\$406.73	\$0.05	\$406.67	\$309.00	31.6%
Preschoolers	9,990	63.83	5.36	0.00	1.019	70.50	(1.70%)	1.048	72.59	12.31	84.90	1.60	83.30	82.37	1.1%
Children	10,781	73.44	3.88	0.00	1.010	78.13	(1.70%)	1.048	80.45	13.64	94.10	8.38	85.72	85.12	0.7%
Adolescents	7,859	103.34	7.06	0.07	1.010	111.59	(1.70%)	1.048	114.91	19.49	134.39	8.50	125.90	121.48	3.6%
Adult Males	837	230.98	12.95	0.00	1.008	245.80	(1.70%)	1.095	264.56	44.87	309.42	5.00	304.42	312.93	(2.7%)
Adult Females	5,074	225.15	5.06	0.00	1.009	232.25	(1.70%)	1.095	249.97	42.39	292.37	4.33	288.03	282.25	2.0%
Composite	37,685	\$116.19	\$11.54	\$0.01	1.013	\$129.27	(1.70%)	1.055	\$134.77	\$22.86	\$157.62	\$5.29	\$152.33	\$142.26	7.1%
Maternity Delivery Payment	115	\$3,575.07	\$0.00	\$0.00	1.000	\$3,575.07	0.00%	0.964	\$3,447.64	\$181.45	\$3,629.09	\$0.00	\$3,629.09	\$3,410.52	6.4%

Region: Central  
Package: AB

	Projected 2007	CY2007 Adjusted	Large Claim	Foster Children	Physician Fee Schedule	Total Claim	TPL	Area	Regional Adjusted	Admin/ Profit/	2007 Proposed	Mental Health	2007 Proposed	2006 Actual	
	Enrollment	Claim Cost	Adjustment	Adjustment	Increase	Cost	Adjustment	Factor	Claim Cost	Surplus	Cap Rate	Carve In	Cap Rate	Cap Rate	% Change
Population															
Newborns	12,159	\$254.90	\$78.76	\$0.00	1.014	\$338.33	(1.70%)	0.965	\$320.90	\$54.42	\$375.32	\$0.05	\$375.27	\$309.00	21.4%
Preschoolers	38,189	63.83	5.36	0.00	1.019	70.50	(1.70%)	0.942	65.26	11.07	76.32	1.44	74.88	82.37	(9.1%)
Children	39,597	73.44	3.88	0.00	1.010	78.13	(1.70%)	0.942	72.32	12.27	84.59	7.53	77.06	85.12	(9.5%)
Adolescents	28,771	103.34	7.06	0.07	1.010	111.59	(1.70%)	0.942	103.29	17.52	120.81	7.64	113.17	121.48	(6.8%)
Adult Males	2,242	230.98	12.95	0.00	1.008	245.80	(1.70%)	0.901	217.63	36.91	254.54	4.11	250.43	312.93	(20.0%)
Adult Females	22,036	225.15	5.06	0.00	1.009	232.25	(1.70%)	0.901	205.63	34.87	240.51	3.56	236.95	282.25	(16.1%)
Composite	142,994	\$118.17	\$11.61	\$0.01	1.013	\$131.33	(1.70%)	0.937	\$120.63	\$20.46	\$141.08	\$4.62	\$136.46	\$144.69	(5.7%)
Maternity Delivery Payment	689	\$3,575.07	\$0.00	\$0.00	1.000	\$3,575.07	0.00%	1.002	\$3,583.01	\$188.58	\$3,771.59	\$0.00	\$3,771.59	\$3,410.52	10.6%

Region: East Central  
Package: AB

	Projected 2007	CY2007 Adjusted	Large Claim	Foster Children	Physician Fee Schedule	Total Claim	TPL	Area	Regional Adjusted	Admin/ Profit/	2007 Proposed	Mental Health	2007 Proposed	2006 Actual	
	Enrollment	Claim Cost	Adjustment	Adjustment	Increase	Cost	Adjustment	Factor	Claim Cost	Surplus	Cap Rate	Carve In	Cap Rate	Cap Rate	% Change
Population															
Newborns	3,783	\$254.90	\$78.76	\$0.00	1.014	\$338.33	(1.70%)	1.065	\$354.29	\$60.08	\$414.38	\$0.05	\$414.32	\$309.00	34.1%
Preschoolers	12,242	63.83	5.36	0.00	1.019	70.50	(1.70%)	1.078	74.70	12.67	87.37	1.65	85.72	82.37	4.1%
Children	14,059	73.44	3.88	0.00	1.010	78.13	(1.70%)	1.078	82.79	14.04	96.83	8.62	88.21	85.12	3.6%
Adolescents	10,117	103.34	7.06	0.07	1.010	111.59	(1.70%)	1.078	118.25	20.05	138.30	8.74	129.56	121.48	6.6%
Adult Males	1,195	230.98	12.95	0.00	1.008	245.80	(1.70%)	1.076	259.94	44.08	304.03	4.91	299.12	312.93	(4.4%)
Adult Females	7,097	225.15	5.06	0.00	1.009	232.25	(1.70%)	1.076	245.61	41.65	287.27	4.26	283.01	282.25	0.3%
Composite	48,493	\$117.49	\$11.16	\$0.01	1.012	\$130.17	(1.70%)	1.077	\$137.52	\$23.32	\$160.84	\$5.49	\$155.36	\$143.94	7.9%
Maternity Delivery Payment	183	\$3,575.07	\$0.00	\$0.00	1.000	\$3,575.07	0.00%	1.002	\$3,582.67	\$188.56	\$3,771.23	\$0.00	\$3,771.23	\$3,410.52	10.6%

State of Indiana  
Office of Medicaid Policy & Planning  
CY2007 Capitation Rates  
Non-MAU Population  
High Rate Range

<b>Region:</b>	<b>Southeast</b>														
<b>Package:</b>	<b>AB</b>														
	<b>Projected</b>	<b>CY2007</b>	<b>Large</b>	<b>Foster</b>	<b>Physician</b>	<b>Total</b>			<b>Regional</b>	<b>Admin/</b>			<b>2007 Proposed</b>	<b>2006 Actual</b>	
	<b>2007</b>	<b>Adjusted</b>	<b>Claim</b>	<b>Children</b>	<b>Fee Schedule</b>	<b>Claim</b>	<b>TPL</b>	<b>Area</b>	<b>Adjusted</b>	<b>Profit/</b>	<b>2007 Proposed</b>	<b>Mental Health</b>	<b>Cap Rate</b>	<b>Cap Rate</b>	<b>% Change</b>
<b>Population</b>	<b>Enrollment</b>	<b>Claim Cost</b>	<b>Adjustment</b>	<b>Adjustment</b>	<b>Increase</b>	<b>Cost</b>	<b>Adjustment</b>	<b>Factor</b>	<b>Claim Cost</b>	<b>Surplus</b>	<b>Cap Rate</b>	<b>Carve In</b>	<b>Net of MH</b>	<b>Cap Rate</b>	<b>% Change</b>
Newborns	3,661	\$254.90	\$78.76	\$0.00	1.014	\$338.33	(1.70%)	1.092	\$363.34	\$61.62	\$424.95	\$0.06	\$424.90	\$309.00	37.5%
Preschoolers	10,748	63.83	5.36	0.00	1.019	70.50	(1.70%)	1.081	74.89	12.70	87.59	1.65	85.93	82.37	4.3%
Children	12,265	73.44	3.88	0.00	1.010	78.13	(1.70%)	1.081	83.00	14.08	97.07	8.64	88.43	85.12	3.9%
Adolescents	8,727	103.34	7.06	0.07	1.010	111.59	(1.70%)	1.081	118.54	20.10	138.64	8.77	129.88	121.48	6.9%
Adult Males	732	230.98	12.95	0.00	1.008	245.80	(1.70%)	1.115	269.47	45.70	315.17	5.09	310.08	312.93	(0.9%)
Adult Females	5,281	225.15	5.06	0.00	1.009	232.25	(1.70%)	1.115	254.62	43.18	297.80	4.41	293.39	282.25	3.9%
<b>Composite</b>	41,414	\$115.42	\$11.87	\$0.01	1.013	\$128.82	(1.70%)	1.087	\$138.34	\$23.46	\$161.81	\$5.49	\$156.31	\$141.03	10.8%
<b>Maternity Delivery Payment</b>	80	\$3,575.07	\$0.00	\$0.00	1.000	\$3,575.07	0.00%	1.017	\$3,634.72	\$191.30	\$3,826.02	\$0.00	\$3,826.02	\$3,434.52	11.4%

<b>Region:</b>	<b>Southwest</b>														
<b>Package:</b>	<b>AB</b>														
	<b>Projected</b>	<b>CY2007</b>	<b>Large</b>	<b>Foster</b>	<b>Physician</b>	<b>Total</b>			<b>Regional</b>	<b>Admin/</b>			<b>2007 Proposed</b>	<b>2006 Actual</b>	
	<b>2007</b>	<b>Adjusted</b>	<b>Claim</b>	<b>Children</b>	<b>Fee Schedule</b>	<b>Claim</b>	<b>TPL</b>	<b>Area</b>	<b>Adjusted</b>	<b>Profit/</b>	<b>2007 Proposed</b>	<b>Mental Health</b>	<b>Cap Rate</b>	<b>Cap Rate</b>	<b>% Change</b>
<b>Population</b>	<b>Enrollment</b>	<b>Claim Cost</b>	<b>Adjustment</b>	<b>Adjustment</b>	<b>Increase</b>	<b>Cost</b>	<b>Adjustment</b>	<b>Factor</b>	<b>Claim Cost</b>	<b>Surplus</b>	<b>Cap Rate</b>	<b>Carve In</b>	<b>Net of MH</b>	<b>Cap Rate</b>	<b>% Change</b>
Newborns	4,315	\$254.90	\$78.76	\$0.00	1.014	\$338.33	(1.70%)	1.071	\$356.15	\$60.40	\$416.55	\$0.05	\$416.49	\$309.00	34.8%
Preschoolers	13,263	63.83	5.36	0.00	1.019	70.50	(1.70%)	1.135	78.68	13.34	92.03	1.74	90.29	82.37	9.6%
Children	14,955	73.44	3.88	0.00	1.010	78.13	(1.70%)	1.135	87.20	14.79	101.99	9.08	92.91	85.12	9.1%
Adolescents	10,517	103.34	7.06	0.07	1.010	111.59	(1.70%)	1.135	124.55	21.12	145.67	9.21	136.46	121.48	12.3%
Adult Males	990	230.98	12.95	0.00	1.008	245.80	(1.70%)	1.178	284.67	48.28	332.94	5.38	327.56	312.93	4.7%
Adult Females	6,992	225.15	5.06	0.00	1.009	232.25	(1.70%)	1.178	268.97	45.62	314.59	4.66	309.93	282.25	9.8%
<b>Composite</b>	51,032	\$116.29	\$11.59	\$0.01	1.013	\$129.41	(1.70%)	1.137	\$144.16	\$24.45	\$168.61	\$5.76	\$162.85	\$142.26	14.5%
<b>Maternity Delivery Payment</b>	204	\$3,575.07	\$0.00	\$0.00	1.000	\$3,575.07	0.00%	1.012	\$3,619.60	\$190.51	\$3,810.10	\$0.00	\$3,810.10	\$3,434.52	10.9%

<b>Region:</b>	<b>Statewide</b>														
<b>Package:</b>	<b>AB</b>														
	<b>Projected</b>	<b>CY2007</b>	<b>Large</b>	<b>Foster</b>	<b>Physician</b>	<b>Total</b>			<b>Regional</b>	<b>Admin/</b>			<b>2007 Proposed</b>	<b>2006 Actual</b>	
	<b>2007</b>	<b>Adjusted</b>	<b>Claim</b>	<b>Children</b>	<b>Fee Schedule</b>	<b>Claim</b>	<b>TPL</b>	<b>Area</b>	<b>Adjusted</b>	<b>Profit/</b>	<b>2007 Proposed</b>	<b>Mental Health</b>	<b>Cap Rate</b>	<b>Cap Rate</b>	<b>% Change</b>
<b>Population</b>	<b>Enrollment</b>	<b>Claim Cost</b>	<b>Adjustment</b>	<b>Adjustment</b>	<b>Increase</b>	<b>Cost</b>	<b>Adjustment</b>	<b>Factor</b>	<b>Claim Cost</b>	<b>Surplus</b>	<b>Cap Rate</b>	<b>Carve In</b>	<b>Net of MH</b>	<b>Cap Rate</b>	<b>% Change</b>
Newborns	42,029	\$254.90	\$78.76	\$0.00	1.014	\$338.33	(1.70%)	0.999	\$332.26	\$56.35	\$388.61	\$0.05	\$388.56	\$316.08	22.9%
Preschoolers	133,082	63.83	5.36	0.00	1.019	70.50	(1.70%)	0.999	69.22	11.74	80.96	1.53	79.43	79.02	0.5%
Children	144,252	73.44	3.88	0.00	1.010	78.13	(1.70%)	1.001	76.84	13.03	89.87	8.00	81.87	81.66	0.3%
Adolescents	102,072	103.34	7.06	0.07	1.010	111.59	(1.70%)	1.001	109.77	18.62	128.39	8.11	120.27	116.71	3.1%
Adult Males	9,042	230.98	12.95	0.00	1.008	245.80	(1.70%)	1.012	244.60	41.48	286.09	4.57	281.52	292.39	(3.7%)
Adult Females	74,108	225.15	5.06	0.00	1.009	232.25	(1.70%)	0.998	227.96	38.66	266.62	3.96	262.66	261.74	0.4%
<b>Composite</b>	504,585	\$117.17	\$11.49	\$0.01	1.013	\$130.20	(1.70%)	1.000	\$127.97	\$21.70	\$149.67	\$5.00	\$144.67	\$137.80	5.0%
<b>Maternity Delivery Payment</b>	1,849	\$3,575.07	\$0.00	\$0.00	1.000	\$3,575.07	0.00%	1.000	\$3,575.07	\$188.16	\$3,763.23	\$0.00	\$3,763.23	\$3,434.52	9.6%

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Region: Northwest  
Package: C

	Projected 2007	CY2007 Adjusted	Large Claim	Physician Fee Schedule	Total Claim	TPL	Area	Regional Adjusted	Admin/ Profit/	2007 Proposed	Mental Health	2007 Proposed	2006 Actual	
<u>Population</u>	<u>Enrollment</u>	<u>Claim Cost</u>	<u>Adjustment</u>	<u>Increase</u>	<u>Cost</u>	<u>Adjustment</u>	<u>Factor</u>	<u>Claim Cost</u>	<u>Surplus</u>	<u>Cap Rate</u>	<u>Carve In</u>	<u>Net of MH</u>	<u>Cap Rate</u>	<u>% Change</u>
Newborns	22	\$126.90	\$43.75	1.022	\$174.41	0.00%	1.000	\$174.41	\$29.58	\$203.98	\$0.00	\$203.98	\$182.83	11.6%
Preschoolers	608	76.75	2.18	1.021	80.61	0.00%	0.910	73.35	12.44	85.79	1.16	84.63	75.65	11.9%
Children	821	90.59	0.33	1.012	92.05	0.00%	0.910	83.77	14.21	97.97	7.57	90.40	70.41	28.4%
Adolescents	585	107.17	12.29	1.011	120.78	0.00%	0.910	109.91	18.64	128.55	8.55	120.00	97.78	22.7%
<b>Composite</b>	2,036	\$91.61	\$4.79	1.015	\$97.78	0.00%	0.911	\$89.15	\$15.12	\$104.27	\$5.86	\$98.41	\$81.05	21.4%

Region: North Central  
Package: C

	Projected 2007	CY2007 Adjusted	Large Claim	Physician Fee Schedule	Total Claim	TPL	Area	Regional Adjusted	Admin/ Profit/	2007 Proposed	Mental Health	2007 Proposed	2006 Actual	
<u>Population</u>	<u>Enrollment</u>	<u>Claim Cost</u>	<u>Adjustment</u>	<u>Increase</u>	<u>Cost</u>	<u>Adjustment</u>	<u>Factor</u>	<u>Claim Cost</u>	<u>Surplus</u>	<u>Cap Rate</u>	<u>Carve In</u>	<u>Net of MH</u>	<u>Cap Rate</u>	<u>% Change</u>
Newborns	22	\$126.90	\$43.75	1.022	\$174.41	0.00%	1.000	\$174.41	\$29.58	\$203.98	\$0.00	\$203.98	\$182.83	11.6%
Preschoolers	610	76.75	2.18	1.021	80.61	0.00%	0.990	79.76	13.53	93.29	1.26	92.03	75.65	21.6%
Children	725	90.59	0.33	1.012	92.05	0.00%	0.990	91.09	15.45	106.54	8.24	98.30	70.41	39.6%
Adolescents	462	107.17	12.29	1.011	120.78	0.00%	0.990	119.52	20.27	139.78	9.30	130.49	97.78	33.5%
<b>Composite</b>	1,819	\$90.60	\$4.52	1.015	\$96.51	0.00%	0.990	\$95.52	\$16.20	\$111.72	\$6.07	\$105.65	\$80.48	31.3%

Region: Northeast  
Package: C

	Projected 2007	CY2007 Adjusted	Large Claim	Physician Fee Schedule	Total Claim	TPL	Area	Regional Adjusted	Admin/ Profit/	2007 Proposed	Mental Health	2007 Proposed	2006 Actual	
<u>Population</u>	<u>Enrollment</u>	<u>Claim Cost</u>	<u>Adjustment</u>	<u>Increase</u>	<u>Cost</u>	<u>Adjustment</u>	<u>Factor</u>	<u>Claim Cost</u>	<u>Surplus</u>	<u>Cap Rate</u>	<u>Carve In</u>	<u>Net of MH</u>	<u>Cap Rate</u>	<u>% Change</u>
Newborns	25	\$126.90	\$43.75	1.022	\$174.41	0.00%	1.000	\$174.41	\$29.58	\$203.98	\$0.00	\$203.98	\$182.83	11.6%
Preschoolers	682	76.75	2.18	1.021	80.61	0.00%	0.987	79.55	13.49	93.04	1.26	91.78	75.65	21.3%
Children	850	90.59	0.33	1.012	92.05	0.00%	0.987	90.85	15.41	106.26	8.21	98.04	70.41	39.2%
Adolescents	584	107.17	12.29	1.011	120.78	0.00%	0.987	119.20	20.22	139.42	9.27	130.14	97.78	33.1%
<b>Composite</b>	2,141	\$91.13	\$4.69	1.015	\$97.20	0.00%	0.987	\$95.96	\$16.27	\$112.23	\$6.19	\$106.04	\$80.86	31.1%

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Region: West Central  
Package: C

	Projected 2007	CY2007 Adjusted	Large Claim	Physician Fee Schedule	Total Claim	TPL	Area	Regional Adjusted	Admin/ Profit/	2007 Proposed	Mental Health	2007 Proposed	2006 Actual	
	<u>Enrollment</u>	<u>Claim Cost</u>	<u>Adjustment</u>	<u>Increase</u>	<u>Cost</u>	<u>Adjustment</u>	<u>Factor</u>	<u>Claim Cost</u>	<u>Surplus</u>	<u>Cap Rate</u>	<u>Carve In</u>	<u>Net of MH</u>	<u>Cap Rate</u>	<u>% Change</u>
Newborns	11	\$126.90	\$43.75	1.022	\$174.41	0.00%	1.000	\$174.41	\$29.58	\$203.98	\$0.00	\$203.98	\$170.53	19.6%
Preschoolers	385	76.75	2.18	1.021	80.61	0.00%	1.028	82.84	14.05	96.89	1.31	95.57	80.12	19.3%
Children	530	90.59	0.33	1.012	92.05	0.00%	1.028	94.60	16.04	110.64	8.55	102.09	74.62	36.8%
Adolescents	<u>450</u>	<u>107.17</u>	<u>12.29</u>	<u>1.011</u>	<u>120.78</u>	<u>0.00%</u>	<u>1.028</u>	<u>124.12</u>	<u>21.05</u>	<u>145.17</u>	<u>9.66</u>	<u>135.52</u>	<u>103.49</u>	<u>31.0%</u>
Composite	1,376	\$92.43	\$5.11	1.014	\$98.90	0.00%	1.027	\$101.60	\$17.23	\$118.83	\$6.82	\$112.01	\$86.36	29.7%

Region: Central  
Package: C

	Projected 2007	CY2007 Adjusted	Large Claim	Physician Fee Schedule	Total Claim	TPL	Area	Regional Adjusted	Admin/ Profit/	2007 Proposed	Mental Health	2007 Proposed	2006 Actual	
	<u>Enrollment</u>	<u>Claim Cost</u>	<u>Adjustment</u>	<u>Increase</u>	<u>Cost</u>	<u>Adjustment</u>	<u>Factor</u>	<u>Claim Cost</u>	<u>Surplus</u>	<u>Cap Rate</u>	<u>Carve In</u>	<u>Net of MH</u>	<u>Cap Rate</u>	<u>% Change</u>
Newborns	51	\$126.90	\$43.75	1.022	\$174.41	0.00%	1.000	\$174.41	\$29.58	\$203.98	\$0.00	\$203.98	\$170.53	19.6%
Preschoolers	1,517	76.75	2.18	1.021	80.61	0.00%	0.954	76.89	13.04	89.93	1.22	88.72	80.12	10.7%
Children	1,813	90.59	0.33	1.012	92.05	0.00%	0.954	87.81	14.89	102.70	7.94	94.76	74.62	27.0%
Adolescents	<u>1,171</u>	<u>107.17</u>	<u>12.29</u>	<u>1.011</u>	<u>120.78</u>	<u>0.00%</u>	<u>0.954</u>	<u>115.22</u>	<u>19.54</u>	<u>134.76</u>	<u>8.96</u>	<u>125.79</u>	<u>103.49</u>	<u>21.6%</u>
Composite	4,552	\$90.65	\$4.51	1.015	\$96.55	0.00%	0.954	\$92.19	\$15.64	\$107.83	\$5.87	\$101.95	\$84.95	20.0%

Region: East Central  
Package: C

	Projected 2007	CY2007 Adjusted	Large Claim	Physician Fee Schedule	Total Claim	TPL	Area	Regional Adjusted	Admin/ Profit/	2007 Proposed	Mental Health	2007 Proposed	2006 Actual	
	<u>Enrollment</u>	<u>Claim Cost</u>	<u>Adjustment</u>	<u>Increase</u>	<u>Cost</u>	<u>Adjustment</u>	<u>Factor</u>	<u>Claim Cost</u>	<u>Surplus</u>	<u>Cap Rate</u>	<u>Carve In</u>	<u>Net of MH</u>	<u>Cap Rate</u>	<u>% Change</u>
Newborns	13	\$126.90	\$43.75	1.022	\$174.41	0.00%	1.000	\$174.41	\$29.58	\$203.98	\$0.00	\$203.98	\$170.53	19.6%
Preschoolers	441	76.75	2.18	1.021	80.61	0.00%	1.049	84.52	14.33	98.85	1.34	97.52	80.12	21.7%
Children	627	90.59	0.33	1.012	92.05	0.00%	1.049	96.52	16.37	112.89	8.73	104.16	74.62	39.6%
Adolescents	<u>387</u>	<u>107.17</u>	<u>12.29</u>	<u>1.011</u>	<u>120.78</u>	<u>0.00%</u>	<u>1.049</u>	<u>126.64</u>	<u>21.48</u>	<u>148.12</u>	<u>9.85</u>	<u>138.27</u>	<u>103.49</u>	<u>33.6%</u>
Composite	1,468	\$91.13	\$4.43	1.015	\$96.92	0.00%	1.048	\$101.55	\$17.22	\$118.77	\$6.73	\$112.04	\$84.73	32.2%

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Region: Southeast  
Package: C

	Projected 2007	CY2007 Adjusted	Large Claim	Physician Fee Schedule	Total Claim	TPL	Area	Regional Adjusted	Admin/ Profit/	2007 Proposed	Mental Health	2007 Proposed	2006 Actual	
<u>Population</u>	<u>Enrollment</u>	<u>Claim Cost</u>	<u>Adjustment</u>	<u>Increase</u>	<u>Cost</u>	<u>Adjustment</u>	<u>Factor</u>	<u>Claim Cost</u>	<u>Surplus</u>	<u>Cap Rate</u>	<u>Carve In</u>	<u>Net of MH</u>	<u>Cap Rate</u>	<u>% Change</u>
Newborns	21	\$126.90	\$43.75	1.022	\$174.41	0.00%	1.000	\$174.41	\$29.58	\$203.98	\$0.00	\$203.98	\$171.58	18.9%
Preschoolers	459	76.75	2.18	1.021	80.61	0.00%	1.063	85.70	14.53	100.23	1.36	98.87	80.19	23.3%
Children	646	90.59	0.33	1.012	92.05	0.00%	1.063	97.87	16.60	114.46	8.85	105.61	74.51	41.7%
Adolescents	452	107.17	12.29	1.011	120.78	0.00%	1.063	128.41	21.78	150.18	9.99	140.19	103.40	35.6%
<b>Composite</b>	1,578	\$91.80	\$4.88	1.015	\$98.05	0.00%	1.062	\$104.09	\$17.65	\$121.75	\$6.88	\$114.87	\$85.73	34.0%

Region: Southwest  
Package: C

	Projected 2007	CY2007 Adjusted	Large Claim	Physician Fee Schedule	Total Claim	TPL	Area	Regional Adjusted	Admin/ Profit/	2007 Proposed	Mental Health	2007 Proposed	2006 Actual	
<u>Population</u>	<u>Enrollment</u>	<u>Claim Cost</u>	<u>Adjustment</u>	<u>Increase</u>	<u>Cost</u>	<u>Adjustment</u>	<u>Factor</u>	<u>Claim Cost</u>	<u>Surplus</u>	<u>Cap Rate</u>	<u>Carve In</u>	<u>Net of MH</u>	<u>Cap Rate</u>	<u>% Change</u>
Newborns	24	\$126.90	\$43.75	1.022	\$174.41	0.00%	1.000	\$174.41	\$29.58	\$203.98	\$0.00	\$203.98	\$171.58	18.9%
Preschoolers	632	76.75	2.18	1.021	80.61	0.00%	1.110	89.46	15.17	104.63	1.42	103.21	80.19	28.7%
Children	810	90.59	0.33	1.012	92.05	0.00%	1.110	102.16	17.33	119.48	9.24	110.25	74.51	48.0%
Adolescents	568	107.17	12.29	1.011	120.78	0.00%	1.110	134.04	22.73	156.77	10.43	146.35	103.40	41.5%
<b>Composite</b>	2,034	\$91.35	\$4.76	1.015	\$97.49	0.00%	1.109	\$107.97	\$18.31	\$126.28	\$7.03	\$119.25	\$85.49	39.5%

Region: Statewide  
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	Projected 2007	CY2007 Adjusted	Large Claim	Physician Fee Schedule	Total Claim	TPL	Area	Regional Adjusted	Admin/ Profit/	2007 Proposed	Mental Health	2007 Proposed	2006 Actual	
<u>Population</u>	<u>Enrollment</u>	<u>Claim Cost</u>	<u>Adjustment</u>	<u>Increase</u>	<u>Cost</u>	<u>Adjustment</u>	<u>Factor</u>	<u>Claim Cost</u>	<u>Surplus</u>	<u>Cap Rate</u>	<u>Carve In</u>	<u>Net of MH</u>	<u>Cap Rate</u>	<u>% Change</u>
Newborns	189	\$126.90	\$43.75	1.022	\$174.41	0.00%	1.000	\$174.41	\$29.58	\$203.98	\$0.00	\$203.98	\$175.27	16.4%
Preschoolers	5,334	76.75	2.18	1.021	80.61	0.00%	0.998	80.46	13.65	94.11	1.28	92.83	78.54	18.2%
Children	6,822	90.59	0.33	1.012	92.05	0.00%	1.000	92.03	15.61	107.64	8.32	99.32	73.12	35.8%
Adolescents	4,659	107.17	12.29	1.011	120.78	0.00%	1.001	120.86	20.50	141.36	9.40	131.96	101.47	30.1%
<b>Composite</b>	17,004	\$91.20	\$4.67	1.015	\$97.25	0.00%	1.000	\$97.22	\$16.49	\$113.71	\$6.31	\$107.39	\$83.72	28.3%



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	Projected 2007	CY2007 Adjusted	Large Claim	Foster Children	Physician Fee Schedule	Total Claim	TPL	Area	Regional Adjusted	Admin/ Profit/	2007 Proposed	Mental Health	2007 Proposed
<u>Population</u>	<u>Enrollment</u>	<u>Claim Cost</u>	<u>Adjustment</u>	<u>Adjustment</u>	<u>Increase</u>	<u>Cost</u>	<u>Adjustment</u>	<u>Factor</u>	<u>Claim Cost</u>	<u>Surplus</u>	<u>Cap Rate</u>	<u>Carve In</u>	<u>Cap Rate</u>
Newborns	4	\$800.78	\$319.18	\$0.00	1.015	\$1,136.54	(1.70%)	1.000	\$1,117.22	\$189.47	\$1,306.69	\$0.00	\$1,306.69
Preschoolers	1,724	350.27	191.83	0.00	1.007	545.84	(1.70%)	1.000	536.56	91.00	627.56	13.27	614.29
Children	3,721	266.01	54.60	0.00	1.005	322.31	(1.70%)	1.000	316.83	53.73	370.56	38.13	332.43
Adolescents	2,751	254.70	43.28	0.17	1.001	298.20	(1.70%)	1.000	293.13	49.71	342.84	26.71	316.13
Adult Males	700	359.12	30.72	0.00	1.006	392.34	(1.70%)	1.000	385.67	65.41	451.08	5.42	445.66
Adult Females	<u>4,509</u>	<u>445.30</u>	<u>45.53</u>	<u>0.00</u>	<u>1.006</u>	<u>493.73</u>	<u>(1.70%)</u>	<u>1.000</u>	<u>485.33</u>	<u>82.31</u>	<u>567.64</u>	<u>13.22</u>	<u>554.42</u>
<b>Composite</b>	13,409	\$339.83	\$65.71	\$0.03	1.005	\$407.64	(1.70%)	1.000	\$400.71	\$67.96	\$468.67	\$22.50	\$446.17
<b>Maternity Delivery Payment</b>	22	\$3,658.02	\$0.00	\$0.00	1.000	\$3,658.02	0.00%	1.000	\$3,658.02	\$192.53	\$3,850.54	\$0.00	\$3,850.54

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AB

	Projected 2007	CY2007 Adjusted	Large Claim	Foster Children	Physician Fee Schedule	Total Claim	TPL	Area	Regional Adjusted	Admin/ Profit/	2007 Proposed	Mental Health	2007 Proposed
<u>Population</u>	<u>Enrollment</u>	<u>Claim Cost</u>	<u>Adjustment</u>	<u>Adjustment</u>	<u>Increase</u>	<u>Cost</u>	<u>Adjustment</u>	<u>Factor</u>	<u>Claim Cost</u>	<u>Surplus</u>	<u>Cap Rate</u>	<u>Carve In</u>	<u>Cap Rate</u>
Newborns	4	\$829.90	\$347.34	\$0.00	1.015	\$1,194.67	(1.70%)	1.000	\$1,174.36	\$199.16	\$1,373.52	\$0.00	\$1,373.52
Preschoolers	1,724	367.75	208.76	0.00	1.007	580.49	(1.70%)	1.000	570.62	96.77	667.39	13.85	653.55
Children	3,721	281.07	59.42	0.00	1.005	342.30	(1.70%)	1.000	336.48	57.06	393.54	40.73	352.82
Adolescents	2,751	256.58	47.10	0.17	1.001	303.89	(1.70%)	1.000	298.73	50.66	349.39	28.50	320.89
Adult Males	700	361.44	33.43	0.00	1.006	397.40	(1.70%)	1.000	390.64	66.25	456.89	5.75	451.14
Adult Females	4,509	449.05	49.55	0.00	1.006	501.54	(1.70%)	1.000	493.02	83.61	576.63	14.07	562.56
<b>Composite</b>	13,409	\$348.04	\$71.50	\$0.03	1.005	\$421.72	(1.70%)	1.000	\$414.55	\$70.30	\$484.86	\$23.96	\$460.90
<b>Maternity Delivery Payment</b>	22	\$4,020.16	\$0.00	\$0.00	1.000	\$4,020.16	0.00%	1.000	\$4,020.16	\$211.59	\$4,231.75	\$0.00	\$4,231.75



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## **ATTACHMENT 5**

State of Indiana  
Office of Medicaid Policy & Planning  
CY2007 Risk Based Managed Care Capitation Rates  
Rates Include Mental Health Carve In  
Low Rate Range

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Region: Northwest  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>Expenditures</u>	<u>Expenditures</u>	<u>Difference</u>
Newborns	5,588	\$334.20	-	\$1,306.69	5,588	\$334.20	\$328.88	1.6%	\$22,410,043	\$22,053,456	\$356,587
Preschoolers	20,263	68.11	335	627.56	20,598	77.21	73.20	5.5%	19,083,246	18,093,120	990,126
Children	22,647	77.13	732	370.56	23,379	86.32	75.62	14.2%	24,216,926	21,214,525	3,002,402
Adolescents	15,543	112.83	530	342.84	16,073	120.42	107.96	11.5%	23,225,334	20,823,794	2,401,540
Adult Males	1,241	270.00	78	451.08	1,319	280.71	251.95	11.4%	4,443,019	3,987,800	455,219
Adult Females	13,537	257.11	888	567.64	14,425	276.23	227.23	21.6%	47,815,059	39,334,054	8,481,004
<b>Composite</b>	78,819	\$134.02	2,563	\$469.15	81,382	\$144.58	\$128.52	12.5%	\$141,193,628	\$125,506,749	\$15,686,879
<b>Maternity Delivery Payment</b>	364	\$3,429.99	7	\$3,850.54	371	\$3,437.92	\$3,441.37	(0.1%)	\$15,305,635	\$15,320,979	(\$15,344)

Region: North Central  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>Expenditures</u>	<u>Expenditures</u>	<u>Difference</u>
Newborns	4,608	\$328.46	1	\$1,306.69	4,609	\$328.67	\$328.88	(0.1%)	\$18,178,155	\$18,189,760	(\$11,605)
Preschoolers	13,340	74.91	173	627.56	13,513	81.98	73.20	12.0%	13,293,856	11,869,712	1,424,143
Children	13,886	84.83	390	370.56	14,276	92.64	75.62	22.5%	15,870,336	12,954,299	2,916,038
Adolescents	9,678	124.10	284	342.84	9,962	130.33	107.96	20.7%	15,580,576	12,906,529	2,674,047
Adult Males	791	249.42	55	451.08	846	262.53	251.95	4.2%	2,665,162	2,557,755	107,407
Adult Females	6,780	237.51	394	567.64	7,174	255.64	227.23	12.5%	22,007,747	19,562,045	2,445,701
<b>Composite</b>	49,083	\$136.49	1,297	\$462.78	50,380	\$144.89	\$129.09	12.2%	\$87,595,832	\$78,040,100	\$9,555,732
<b>Maternity Delivery Payment</b>	81	\$3,421.86	2	\$3,850.54	83	\$3,432.19	\$3,441.37	(0.3%)	\$3,418,460	\$3,427,605	(\$9,144)

Region: Northeast  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>Expenditures</u>	<u>Expenditures</u>	<u>Difference</u>
Newborns	4,771	\$353.86	-	\$1,306.69	4,771	\$353.86	\$328.88	7.6%	\$20,259,189	\$18,829,105	\$1,430,085
Preschoolers	15,047	75.40	169	627.56	15,216	81.53	73.20	11.4%	14,887,477	13,365,614	1,521,864
Children	16,062	85.39	318	370.56	16,380	90.93	75.62	20.3%	17,873,392	14,863,506	3,009,885
Adolescents	10,860	124.92	234	342.84	11,094	129.51	107.96	20.0%	17,241,918	14,373,121	2,868,797
Adult Males	1,014	262.95	38	451.08	1,052	269.74	251.95	7.1%	3,405,209	3,180,565	224,644
Adult Females	7,311	250.40	344	567.64	7,655	264.65	227.23	16.5%	24,310,935	20,873,635	3,437,300
<b>Composite</b>	55,065	\$138.90	1,103	\$468.30	56,168	\$145.36	\$126.83	14.6%	\$97,978,121	\$85,485,546	\$12,492,575
<b>Maternity Delivery Payment</b>	133	\$3,366.24	1	\$3,850.54	134	\$3,369.86	\$3,441.37	(2.1%)	\$5,418,728	\$5,533,723	(\$114,995)

State of Indiana  
Office of Medicaid Policy & Planning  
CY2007 Risk Based Managed Care Capitation Rates  
Rates Include Mental Health Carve In  
Low Rate Range

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Region: West Central  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	3,144	\$370.16	-	\$1,306.69	3,144	\$370.16	\$309.00	19.8%	\$13,965,584	\$11,657,991	\$2,307,593
Preschoolers	9,990	78.92	110	627.56	10,100	84.90	82.37	3.1%	10,289,496	9,983,441	306,054
Children	10,781	89.38	261	370.56	11,042	96.03	85.12	12.8%	12,724,052	11,279,213	1,444,839
Adolescents	7,859	130.75	165	342.84	8,024	135.11	121.48	11.2%	13,009,507	11,697,440	1,312,067
Adult Males	837	296.61	76	451.08	913	309.47	312.93	(1.1%)	3,390,557	3,428,494	(37,937)
Adult Females	5,074	282.46	330	567.64	5,404	299.87	282.25	6.2%	19,446,033	18,303,533	1,142,500
Composite	37,685	\$149.26	942	\$471.25	38,627	\$157.11	\$143.14	9.8%	\$72,825,229	\$66,350,112	\$6,475,117
Maternity Delivery Payment	115	\$3,302.18	0	\$3,850.54	115	\$3,302.18	\$3,410.52	(3.2%)	\$4,557,005	\$4,706,518	(\$149,512)

Region: Central  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	12,159	\$341.58	3	\$1,306.69	12,162	\$341.82	\$309.00	10.6%	\$49,886,315	\$45,096,845	\$4,789,470
Preschoolers	38,189	70.95	528	627.56	38,717	78.54	82.37	(4.7%)	36,488,417	38,270,188	(1,781,772)
Children	39,597	80.35	1,042	370.56	40,639	87.79	85.12	3.1%	42,812,276	41,512,041	1,300,235
Adolescents	28,771	117.54	826	342.84	29,597	123.82	121.48	1.9%	43,977,658	43,146,700	830,957
Adult Males	2,242	244.00	146	451.08	2,388	256.66	312.93	(18.0%)	7,354,923	8,967,408	(1,612,485)
Adult Females	22,036	232.36	1,134	567.64	23,170	248.77	282.25	(11.9%)	69,167,005	78,477,583	(9,310,578)
Composite	142,994	\$133.52	3,679	\$465.93	146,673	\$141.86	\$145.15	(2.3%)	\$249,686,594	\$255,470,766	(\$5,784,172)
Maternity Delivery Payment	689	\$3,431.83	9	\$3,850.54	698	\$3,437.23	\$3,410.52	0.8%	\$28,790,267	\$28,566,516	\$223,752

Region: East Central  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	3,783	\$377.13	-	\$1,306.69	3,783	\$377.13	\$309.00	22.0%	\$17,120,142	\$14,027,410	\$3,092,731
Preschoolers	12,242	81.22	151	627.56	12,393	87.87	82.37	6.7%	13,068,237	12,249,979	818,258
Children	14,059	91.98	364	370.56	14,423	99.01	85.12	16.3%	17,136,554	14,732,847	2,403,707
Adolescents	10,117	134.55	252	342.84	10,369	139.61	121.48	14.9%	17,371,884	15,115,996	2,255,888
Adult Males	1,195	291.44	111	451.08	1,306	305.01	312.93	(2.5%)	4,780,099	4,904,286	(124,187)
Adult Females	7,097	277.53	486	567.64	7,583	296.12	282.25	4.9%	26,946,164	25,683,880	1,262,284
Composite	48,493	\$152.46	1,364	\$470.66	49,857	\$161.17	\$144.94	11.2%	\$96,423,080	\$86,714,399	\$9,708,681
Maternity Delivery Payment	183	\$3,431.51	0	\$3,850.54	183	\$3,431.51	\$3,410.52	0.6%	\$7,535,599	\$7,489,502	\$46,097

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Region: Southwest  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	4,315	\$379.10	-	\$1,306.69	4,315	\$379.10	\$309.00	22.7%	\$19,629,918	\$16,000,073	\$3,629,846
Preschoolers	13,263	85.54	149	627.56	13,412	91.56	82.37	11.2%	14,736,709	13,257,220	1,479,490
Children	14,955	96.88	357	370.56	15,312	103.26	85.12	21.3%	18,973,585	15,640,945	3,332,640
Adolescents	10,517	141.72	270	342.84	10,787	146.75	121.48	20.8%	18,996,213	15,725,359	3,270,854
Adult Males	990	319.16	100	451.08	1,090	331.26	312.93	5.9%	4,332,877	4,093,164	239,714
Adult Females	6,992	303.92	517	567.64	7,509	322.08	282.25	14.1%	29,022,126	25,433,240	3,588,886
Composite	51,032	\$159.72	1,393	\$471.60	52,425	\$168.00	\$143.30	17.2%	\$105,691,429	\$90,150,000	\$15,541,429
Maternity Delivery Payment	204	\$3,466.88	2	\$3,850.54	206	\$3,470.61	\$3,434.52	1.1%	\$8,579,343	\$8,490,133	\$89,210

Region: Southeast  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	3,661	\$386.76	-	\$1,306.69	3,661	\$386.76	\$309.00	25.2%	\$16,990,946	\$13,575,033	\$3,415,913
Preschoolers	10,748	81.42	109	627.56	10,857	86.90	82.37	5.5%	11,321,664	10,731,705	589,959
Children	12,265	92.21	257	370.56	12,522	97.92	85.12	15.0%	14,713,895	12,791,008	1,922,887
Adolescents	8,727	134.88	190	342.84	8,917	139.31	121.48	14.7%	14,907,158	12,999,261	1,907,897
Adult Males	732	302.12	96	451.08	828	319.39	312.93	2.1%	3,173,500	3,109,302	64,197
Adult Females	5,281	287.70	416	567.64	5,697	308.15	282.25	9.2%	21,066,081	19,295,934	1,770,147
Composite	41,414	\$153.08	1,068	\$475.86	42,482	\$161.19	\$142.22	13.3%	\$82,173,244	\$72,502,244	\$9,671,001
Maternity Delivery Payment	80	\$3,481.37	1	\$3,850.54	81	\$3,485.92	\$3,434.52	1.5%	\$3,388,319	\$3,338,353	\$49,965

Region: Statewide  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	42,029	\$353.68	4	\$1,306.69	42,033	\$353.77	\$316.08	11.9%	\$178,440,293	\$159,429,773	\$19,010,519
Preschoolers	133,082	75.26	1,724	627.56	134,806	82.32	79.02	4.2%	133,169,102	127,826,128	5,342,975
Children	144,252	85.37	3,721	370.56	147,973	92.54	81.66	13.3%	164,321,016	144,997,886	19,323,130
Adolescents	102,072	124.91	2,751	342.84	104,823	130.63	116.71	11.9%	164,310,249	146,800,459	17,509,789
Adult Males	9,042	274.24	700	451.08	9,742	286.95	292.39	(1.9%)	33,545,347	34,181,343	(635,996)
Adult Females	74,108	257.58	4,509	567.64	78,617	275.37	261.74	5.2%	259,781,151	246,927,600	12,853,551
Composite	504,585	\$141.73	13,409	\$468.67	517,994	\$150.19	\$138.38	8.5%	\$933,567,157	\$860,163,188	\$73,403,968
Maternity Delivery Payment	1,849	\$3,424.23	22	\$3,850.54	1,871	\$3,429.24	\$3,441.37	(0.4%)	\$76,993,356	\$77,265,639	(\$272,283)

State of Indiana  
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CY2007 Risk Based Managed Care Capitation Rates  
Rates Include Mental Health Carve In  
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Old Region: North  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	14,967	\$338.70	1	\$1,306.69	14,968	\$338.76	\$328.88	3.0%	\$60,847,387	\$59,072,320	\$1,775,067
Preschoolers	48,650	72.23	677	627.56	49,327	79.85	73.20	9.1%	47,264,579	43,328,446	3,936,133
Children	52,595	81.69	1,440	370.56	54,035	89.39	75.62	18.2%	57,960,654	49,032,330	8,928,325
Adolescents	36,081	119.49	1,048	342.84	37,129	125.80	107.96	16.5%	56,047,828	48,103,444	7,944,384
Adult Males	3,046	262.31	171	451.08	3,217	272.34	251.95	8.1%	10,513,390	9,726,120	787,270
Adult Females	27,628	250.52	1,626	567.64	29,254	268.15	227.23	18.0%	94,133,741	79,769,735	14,364,006
Composite	182,967	\$136.15	4,963	\$467.30	187,930	\$144.90	\$128.16	13.1%	\$326,767,580	\$289,032,395	\$37,735,185
Maternity Delivery Payment	578	\$3,414.18	10	\$3,850.54	588	\$3,421.60	\$3,441.37	(0.6%)	\$24,142,824	\$24,282,307	(\$139,483)

Old Region: Central  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	19,086	\$353.33	3	\$1,306.69	19,089	\$353.48	\$309.00	14.4%	\$80,972,040	\$70,782,246	\$10,189,794
Preschoolers	60,421	74.35	789	627.56	61,210	81.48	82.37	(1.1%)	59,846,150	60,503,609	(657,459)
Children	64,437	84.40	1,667	370.56	66,104	91.61	85.12	7.6%	72,672,882	67,524,101	5,148,781
Adolescents	46,747	123.44	1,243	342.84	47,990	129.12	121.48	6.3%	74,359,049	69,960,136	4,398,913
Adult Males	4,274	267.57	333	451.08	4,607	280.83	312.93	(10.3%)	15,525,579	17,300,188	(1,774,609)
Adult Females	34,207	249.16	1,950	567.64	36,157	266.34	282.25	(5.6%)	115,559,203	122,464,996	(6,905,794)
Composite	229,172	\$140.12	5,985	\$467.84	235,157	\$148.46	\$144.77	2.5%	\$418,934,903	\$408,535,277	\$10,399,626
Maternity Delivery Payment	987	\$3,416.67	9	\$3,850.54	996	\$3,420.59	\$3,434.52	(0.4%)	\$40,882,871	\$41,049,383	(\$166,512)

Old Region: South  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	7,976	\$382.62	-	\$0.00	7,976	\$382.62	\$309.00	23.8%	\$36,620,865	\$29,575,106	\$7,045,759
Preschoolers	24,011	83.70	258	627.56	24,269	89.48	82.37	8.6%	26,058,373	23,988,925	2,069,449
Children	27,220	94.77	614	370.56	27,834	100.86	85.12	18.5%	33,687,480	28,431,953	5,255,527
Adolescents	19,244	138.62	460	342.84	19,704	143.39	121.48	18.0%	33,903,371	28,724,620	5,178,751
Adult Males	1,722	311.92	196	451.08	1,918	326.14	312.93	4.2%	7,506,377	7,202,466	303,911
Adult Females	12,273	296.95	933	567.64	13,206	316.07	282.25	12.0%	50,088,207	44,729,174	5,359,033
Composite	92,446	\$156.74	2,461	\$473.45	94,907	\$164.96	\$142.82	15.5%	\$187,864,674	\$162,652,244	\$25,212,430
Maternity Delivery Payment	284	\$3,470.96	3	\$3,850.54	287	\$3,474.93	\$3,441.37	1.0%	\$11,967,661	\$11,852,078	\$115,583

State of Indiana  
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CY2007 Risk Based Managed Care Capitation Rates  
Rates Include Mental Health Carve In  
High Rate Range

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Region: Northwest  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>Expenditures</u>	<u>Expenditures</u>	<u>Difference</u>
Newborns	5,588	\$367.21	-	\$1,373.52	5,588	\$367.21	\$328.88	11.7%	\$24,623,443	\$22,053,456	\$2,569,987
Preschoolers	20,263	73.27	335	667.39	20,598	82.93	73.20	13.3%	20,498,314	18,093,120	2,405,194
Children	22,647	81.20	732	393.54	23,379	90.98	75.62	20.3%	25,524,751	21,214,525	4,310,226
Adolescents	15,543	115.98	530	349.39	16,073	123.67	107.96	14.5%	23,853,388	20,823,794	3,029,593
Adult Males	1,241	281.66	78	456.89	1,319	292.02	251.95	15.9%	4,622,125	3,987,800	634,325
Adult Females	13,537	266.13	888	576.63	14,425	285.25	227.23	25.5%	49,376,061	39,334,054	10,042,007
<b>Composite</b>	78,819	\$141.21	2,563	\$485.57	81,382	\$152.06	\$128.52	18.3%	\$148,498,081	\$125,506,749	\$22,991,332
<b>Maternity Delivery Payment</b>	364	\$3,769.56	7	\$4,231.75	371	\$3,778.28	\$3,441.37	9.8%	\$16,820,893	\$15,320,979	\$1,499,914

Region: North Central  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>Expenditures</u>	<u>Expenditures</u>	<u>Difference</u>
Newborns	4,608	\$360.90	1	\$1,373.52	4,609	\$361.12	\$328.88	9.8%	\$19,972,832	\$18,189,760	\$1,783,072
Preschoolers	13,340	80.58	173	667.39	13,513	88.10	73.20	20.4%	14,285,220	11,869,712	2,415,507
Children	13,886	89.31	390	393.54	14,276	97.62	75.62	29.1%	16,723,714	12,954,299	3,769,415
Adolescents	9,678	127.56	284	349.39	9,962	133.88	107.96	24.0%	16,004,478	12,906,529	3,097,949
Adult Males	791	260.19	55	456.89	846	272.98	251.95	8.3%	2,771,253	2,557,755	213,498
Adult Females	6,780	245.84	394	576.63	7,174	264.01	227.23	16.2%	22,728,157	19,562,045	3,166,112
<b>Composite</b>	49,083	\$144.35	1,297	\$479.46	50,380	\$152.98	\$129.09	18.5%	\$92,485,653	\$78,040,100	\$14,445,553
<b>Maternity Delivery Payment</b>	81	\$3,760.62	2	\$4,231.75	83	\$3,771.98	\$3,441.37	9.6%	\$3,756,888	\$3,427,605	\$329,283

Region: Northeast  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>Expenditures</u>	<u>Expenditures</u>	<u>Difference</u>
Newborns	4,771	\$388.81	-	\$1,373.52	4,771	\$388.81	\$328.88	18.2%	\$22,260,153	\$18,829,105	\$3,431,049
Preschoolers	15,047	81.12	169	667.39	15,216	87.63	73.20	19.7%	15,999,975	13,365,614	2,634,361
Children	16,062	89.90	318	393.54	16,380	95.80	75.62	26.7%	18,829,487	14,863,506	3,965,980
Adolescents	10,860	128.40	234	349.39	11,094	133.06	107.96	23.2%	17,713,911	14,373,121	3,340,790
Adult Males	1,014	274.30	38	456.89	1,052	280.90	251.95	11.5%	3,546,051	3,180,565	365,486
Adult Females	7,311	259.18	344	576.63	7,655	273.45	227.23	20.3%	25,118,708	20,873,635	4,245,072
<b>Composite</b>	55,065	\$146.86	1,103	\$485.42	56,168	\$153.51	\$126.83	21.0%	\$103,468,285	\$85,485,546	\$17,982,739
<b>Maternity Delivery Payment</b>	133	\$3,699.50	1	\$4,231.75	134	\$3,703.47	\$3,441.37	7.6%	\$5,955,182	\$5,533,723	\$421,459



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Region: West Central  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	3,144	\$406.73	-	\$1,373.52	3,144	\$406.73	\$309.00	31.6%	\$15,344,939	\$11,657,991	\$3,686,949
Preschoolers	9,990	84.90	110	667.39	10,100	91.25	82.37	10.8%	11,059,030	9,983,441	1,075,589
Children	10,781	94.10	261	393.54	11,042	101.18	85.12	18.9%	13,406,121	11,279,213	2,126,907
Adolescents	7,859	134.39	165	349.39	8,024	138.81	121.48	14.3%	13,366,056	11,697,440	1,668,616
Adult Males	837	309.42	76	456.89	913	321.70	312.93	2.8%	3,524,534	3,428,494	96,040
Adult Females	5,074	292.37	330	576.63	5,404	309.72	282.25	9.7%	20,084,966	18,303,533	1,781,433
Composite	37,685	\$157.62	942	\$487.04	38,627	\$165.66	\$143.14	15.7%	\$76,785,646	\$66,350,112	\$10,435,534
Maternity Delivery Payment	115	\$3,629.09	0	\$4,231.75	115	\$3,629.09	\$3,410.52	6.4%	\$5,008,149	\$4,706,518	\$301,631

Region: Central  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	12,159	\$375.32	3	\$1,373.52	12,162	\$375.56	\$309.00	21.5%	\$54,811,257	\$45,096,845	\$9,714,412
Preschoolers	38,189	76.32	528	667.39	38,717	84.38	82.37	2.4%	39,204,546	38,270,188	934,357
Children	39,597	84.59	1,042	393.54	40,639	92.51	85.12	8.7%	45,113,957	41,512,041	3,601,916
Adolescents	28,771	120.81	826	349.39	29,597	127.19	121.48	4.7%	45,173,284	43,146,700	2,026,583
Adult Males	2,242	254.54	146	456.89	2,388	266.91	312.93	(14.7%)	7,648,644	8,967,408	(1,318,764)
Adult Females	22,036	240.51	1,134	576.63	23,170	256.96	282.25	(9.0%)	71,444,825	78,477,583	(7,032,757)
Composite	142,994	\$141.08	3,679	\$482.68	146,673	\$149.65	\$145.15	3.1%	\$263,396,513	\$255,470,766	\$7,925,747
Maternity Delivery Payment	689	\$3,771.59	9	\$4,231.75	698	\$3,777.52	\$3,410.52	10.8%	\$31,640,504	\$28,566,516	\$3,073,988

Region: East Central  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	3,783	\$414.38	-	\$1,373.52	3,783	\$414.38	\$309.00	34.1%	\$18,811,067	\$14,027,410	\$4,783,657
Preschoolers	12,242	87.37	151	667.39	12,393	94.44	82.37	14.6%	14,044,542	12,249,979	1,794,563
Children	14,059	96.83	364	393.54	14,423	104.32	85.12	22.6%	18,055,667	14,732,847	3,322,820
Adolescents	10,117	138.30	252	349.39	10,369	143.43	121.48	18.1%	17,846,851	15,115,996	2,730,854
Adult Males	1,195	304.03	111	456.89	1,306	317.02	312.93	1.3%	4,968,351	4,904,286	64,065
Adult Females	7,097	287.27	486	576.63	7,583	305.81	282.25	8.3%	27,827,760	25,683,880	2,143,880
Composite	48,493	\$160.84	1,364	\$486.09	49,857	\$169.74	\$144.94	17.1%	\$101,554,238	\$86,714,399	\$14,839,839
Maternity Delivery Payment	183	\$3,771.23	0	\$4,231.75	183	\$3,771.23	\$3,410.52	10.6%	\$8,281,623	\$7,489,502	\$792,121

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Region: Southwest  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	4,315	\$416.55	-	\$1,373.52	4,315	\$416.55	\$309.00	34.8%	\$21,568,730	\$16,000,073	\$5,568,657
Preschoolers	13,263	92.03	149	667.39	13,412	98.42	82.37	19.5%	15,839,635	13,257,220	2,582,415
Children	14,955	101.99	357	393.54	15,312	108.79	85.12	27.8%	19,989,332	15,640,945	4,348,387
Adolescents	10,517	145.67	270	349.39	10,787	150.77	121.48	24.1%	19,515,791	15,725,359	3,790,432
Adult Males	990	332.94	100	456.89	1,090	344.31	312.93	10.0%	4,503,617	4,093,164	410,454
Adult Females	6,992	314.59	517	576.63	7,509	332.63	282.25	17.8%	29,972,486	25,433,240	4,539,246
Composite	51,032	\$168.61	1,393	\$486.77	52,425	\$177.06	\$143.30	23.6%	\$111,389,591	\$90,150,000	\$21,239,591
Maternity Delivery Payment	204	\$3,810.10	2	\$4,231.75	206	\$3,814.20	\$3,434.52	11.1%	\$9,428,698	\$8,490,133	\$938,564

Region: Southeast  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	3,661	\$424.95	-	\$1,373.52	3,661	\$424.95	\$309.00	37.5%	\$18,669,112	\$13,575,033	\$5,094,079
Preschoolers	10,748	87.59	109	667.39	10,857	93.41	82.37	13.4%	12,169,508	10,731,705	1,437,802
Children	12,265	97.07	257	393.54	12,522	103.16	85.12	21.2%	15,500,783	12,791,008	2,709,775
Adolescents	8,727	138.64	190	349.39	8,917	143.13	121.48	17.8%	15,315,681	12,999,261	2,316,420
Adult Males	732	315.17	96	456.89	828	331.60	312.93	6.0%	3,294,821	3,109,302	185,519
Adult Females	5,281	297.80	416	576.63	5,697	318.16	282.25	12.7%	21,750,569	19,295,934	2,454,635
Composite	41,414	\$161.81	1,068	\$490.64	42,482	\$170.07	\$142.22	19.6%	\$86,700,473	\$72,502,244	\$14,198,230
Maternity Delivery Payment	80	\$3,826.02	1	\$4,231.75	81	\$3,831.03	\$3,434.52	11.5%	\$3,723,762	\$3,338,353	\$385,409

Region: Statewide  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	42,029	\$388.61	4	\$1,373.52	42,033	\$388.71	\$316.08	23.0%	\$196,061,533	\$159,429,773	\$36,631,760
Preschoolers	133,082	80.96	1,724	667.39	134,806	88.46	79.02	11.9%	143,100,768	127,826,128	15,274,641
Children	144,252	89.87	3,721	393.54	147,973	97.51	81.66	19.4%	173,143,811	144,997,886	28,145,926
Adolescents	102,072	128.39	2,751	349.39	104,823	134.19	116.71	15.0%	168,789,439	146,800,459	21,988,980
Adult Males	9,042	286.09	700	456.89	9,742	298.36	292.39	2.0%	34,879,395	34,181,343	698,052
Adult Females	74,108	266.62	4,509	576.63	78,617	284.40	261.74	8.7%	268,303,532	246,927,600	21,375,932
Composite	504,585	\$149.67	13,409	\$484.86	517,994	\$158.35	\$138.38	14.4%	\$984,278,480	\$860,163,188	\$124,115,292
Maternity Delivery Payment	1,849	\$3,763.23	22	\$4,231.75	1,871	\$3,768.74	\$3,441.37	9.5%	\$84,615,698	\$77,265,639	\$7,350,059

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Old Region: North  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	14,967	\$372.15	1	\$1,373.52	14,968	\$372.22	\$328.88	13.2%	\$66,856,428	\$59,072,320	\$7,784,108
Preschoolers	48,650	77.70	677	667.39	49,327	85.79	73.20	17.2%	50,783,508	43,328,446	7,455,062
Children	52,595	86.00	1,440	393.54	54,035	94.20	75.62	24.6%	61,077,952	49,032,330	12,045,622
Adolescents	36,081	122.82	1,048	349.39	37,129	129.22	107.96	19.7%	57,571,777	48,103,444	9,468,333
Adult Males	3,046	273.63	171	456.89	3,217	283.38	251.95	12.5%	10,939,429	9,726,120	1,213,309
Adult Females	27,628	259.31	1,626	576.63	29,254	276.95	227.23	21.9%	97,222,926	79,769,735	17,453,191
Composite	182,967	\$143.76	4,963	\$483.94	187,930	\$152.74	\$128.16	19.2%	\$344,452,019	\$289,032,395	\$55,419,624
Maternity Delivery Payment	578	\$3,752.18	10	\$4,231.75	588	\$3,760.34	\$3,441.37	9.3%	\$26,532,963	\$24,282,307	\$2,250,656

Old Region: Central  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	19,086	\$388.23	3	\$1,373.52	19,089	\$388.39	\$309.00	25.7%	\$88,967,263	\$70,782,246	\$18,185,017
Preschoolers	60,421	79.98	789	667.39	61,210	87.55	82.37	6.3%	64,308,118	60,503,609	3,804,509
Children	64,437	88.85	1,667	393.54	66,104	96.53	85.12	13.4%	76,575,745	67,524,101	9,051,644
Adolescents	46,747	126.88	1,243	349.39	47,990	132.64	121.48	9.2%	76,386,190	69,960,136	6,426,054
Adult Males	4,274	279.13	333	456.89	4,607	291.97	312.93	(6.7%)	16,141,528	17,300,188	(1,158,660)
Adult Females	34,207	257.90	1,950	576.63	36,157	275.09	282.25	(2.5%)	119,357,552	122,464,996	(3,107,444)
Composite	229,172	\$147.98	5,985	\$484.14	235,157	\$156.54	\$144.77	8.1%	\$441,736,397	\$408,535,277	\$33,201,120
Maternity Delivery Payment	987	\$3,754.92	9	\$4,231.75	996	\$3,759.23	\$3,434.52	9.5%	\$44,930,275	\$41,049,383	\$3,880,892

Old Region: South  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	7,976	\$420.41	-	\$0.00	7,976	\$420.41	\$309.00	36.1%	\$40,237,842	\$29,575,106	\$10,662,736
Preschoolers	24,011	90.04	258	667.39	24,269	96.18	82.37	16.8%	28,009,142	23,988,925	4,020,217
Children	27,220	99.77	614	393.54	27,834	106.26	85.12	24.8%	35,490,115	28,431,953	7,058,162
Adolescents	19,244	142.48	460	349.39	19,704	147.31	121.48	21.3%	34,831,472	28,724,620	6,106,852
Adult Males	1,722	325.39	196	456.89	1,918	338.83	312.93	8.3%	7,798,438	7,202,466	595,972
Adult Females	12,273	307.36	933	576.63	13,206	326.39	282.25	15.6%	51,723,055	44,729,174	6,993,881
Composite	92,446	\$165.56	2,461	\$488.45	94,907	\$173.93	\$142.82	21.8%	\$198,090,064	\$162,652,244	\$35,437,821
Maternity Delivery Payment	284	\$3,814.59	3	\$4,231.75	287	\$3,818.95	\$3,441.37	11.0%	\$13,152,460	\$11,852,078	\$1,300,382

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Region: Northwest  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	5,588	\$334.16	-	\$1,306.69	5,588	\$334.16	\$328.88	1.6%	\$22,407,178	\$22,053,456	\$353,722
Preschoolers	20,263	66.89	335	614.29	20,598	75.79	73.20	3.5%	18,734,042	18,093,120	640,922
Children	22,647	70.84	732	332.43	23,379	79.03	75.62	4.5%	22,172,740	21,214,525	958,216
Adolescents	15,543	106.47	530	316.13	16,073	113.38	107.96	5.0%	21,868,931	20,823,794	1,045,136
Adult Males	1,241	265.99	78	445.66	1,319	276.61	251.95	9.8%	4,378,249	3,987,800	390,449
Adult Females	<u>13,537</u>	<u>253.17</u>	<u>888</u>	<u>554.42</u>	<u>14,425</u>	<u>271.71</u>	<u>227.23</u>	<u>19.6%</u>	<u>47,033,745</u>	<u>39,334,054</u>	<u>7,699,690</u>
Composite	78,819	\$129.91	2,563	\$446.26	<u>81,382</u>	\$139.87	\$128.52	8.8%	\$136,594,885	\$125,506,749	\$11,088,136
Maternity Delivery Payment	364	\$3,429.99	7	\$3,850.54	371	\$3,437.92	\$3,441.37	(0.1%)	\$15,305,635	\$15,320,979	(\$15,344)

Region: North Central  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	4,608	\$328.42	1	\$1,306.69	4,609	\$328.63	\$328.88	(0.1%)	\$18,175,833	\$18,189,760	(\$13,927)
Preschoolers	13,340	73.57	173	614.29	13,513	80.49	73.20	10.0%	13,052,083	11,869,712	\$1,182,370
Children	13,886	77.92	390	332.43	14,276	84.87	75.62	12.2%	14,539,224	12,954,299	1,584,925
Adolescents	9,678	117.10	284	316.13	9,962	122.77	107.96	13.7%	14,676,976	12,906,529	1,770,447
Adult Males	791	245.71	55	445.66	846	258.71	251.95	2.7%	2,626,436	2,557,755	68,681
Adult Females	<u>6,780</u>	<u>233.87</u>	<u>394</u>	<u>554.42</u>	<u>7,174</u>	<u>251.47</u>	<u>227.23</u>	<u>10.7%</u>	<u>21,648,931</u>	<u>19,562,045</u>	<u>2,086,886</u>
Composite	49,083	\$132.22	1,297	\$439.44	<u>50,380</u>	\$140.13	\$129.09	8.6%	\$84,719,482	\$78,040,100	\$6,679,382
Maternity Delivery Payment	81	\$3,421.86	2	\$3,850.54	83	\$3,432.19	\$3,441.37	(0.3%)	\$3,418,460	\$3,427,605	(\$9,144)

Region: Northeast  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	4,771	\$353.81	-	\$1,306.69	4,771	\$353.81	\$328.88	7.6%	\$20,256,599	\$18,829,105	\$1,427,495
Preschoolers	15,047	74.05	169	614.29	15,216	80.05	73.20	9.4%	14,617,332	13,365,614	1,251,718
Children	16,062	78.43	318	332.43	16,380	83.36	75.62	10.2%	16,385,795	14,863,506	1,522,289
Adolescents	10,860	117.87	234	316.13	11,094	122.06	107.96	13.1%	16,249,077	14,373,121	1,875,956
Adult Males	1,014	259.04	38	445.66	1,052	265.78	251.95	5.5%	3,355,233	3,180,565	174,668
Adult Females	<u>7,311</u>	<u>246.56</u>	<u>344</u>	<u>554.42</u>	<u>7,655</u>	<u>260.39</u>	<u>227.23</u>	<u>14.6%</u>	<u>23,919,518</u>	<u>20,873,635</u>	<u>3,045,883</u>
Composite	55,065	\$134.52	1,103	\$445.29	<u>56,168</u>	\$140.63	\$126.83	10.9%	\$94,783,554	\$85,485,546	\$9,298,008
Maternity Delivery Payment	133	\$3,366.24	1	\$3,850.54	134	\$3,369.86	\$3,441.37	(2.1%)	\$5,418,728	\$5,533,723	(\$114,995)

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Region: West Central  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	3,144	\$370.12	-	\$1,306.69	3,144	\$370.12	\$309.00	19.8%	\$13,963,798	\$11,657,991	\$2,305,808
Preschoolers	9,990	77.51	110	614.29	10,100	83.36	82.37	1.2%	10,102,953	9,983,441	119,511
Children	10,781	82.09	261	332.43	11,042	88.01	85.12	3.4%	11,661,744	11,279,213	382,530
Adolescents	7,859	123.38	165	316.13	8,024	127.34	121.48	4.8%	12,261,404	11,697,440	563,965
Adult Males	837	292.21	76	445.66	913	304.98	312.93	(2.5%)	3,341,383	3,428,494	(87,111)
Adult Females	5,074	278.12	330	554.42	5,404	295.00	282.25	4.5%	19,129,968	18,303,533	826,435
Composite	37,685	\$144.58	942	\$449.39	38,627	\$152.01	\$143.14	6.2%	\$70,461,250	\$66,350,112	\$4,111,138
Maternity Delivery Payment	115	\$3,302.18	0	\$3,850.54	115	\$3,302.18	\$3,410.52	(3.2%)	\$4,557,005	\$4,706,518	(\$149,512)

Region: Central  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	12,159	\$341.54	3	\$1,306.69	12,162	\$341.77	\$309.00	10.6%	\$49,879,943	\$45,096,845	\$4,783,098
Preschoolers	38,189	69.68	528	614.29	38,717	77.11	82.37	(6.4%)	35,823,496	38,270,188	(2,446,693)
Children	39,597	73.80	1,042	332.43	40,639	80.43	85.12	(5.5%)	39,222,386	41,512,041	(2,289,655)
Adolescents	28,771	110.91	826	316.13	29,597	116.64	121.48	(4.0%)	41,425,002	43,146,700	(1,721,699)
Adult Males	2,242	240.38	146	445.66	2,388	252.93	312.93	(19.2%)	7,247,963	8,967,408	(1,719,445)
Adult Females	22,036	228.79	1,134	554.42	23,170	244.73	282.25	(13.3%)	68,044,960	78,477,583	(10,432,623)
Composite	142,994	\$129.43	3,679	\$442.93	146,673	\$137.29	\$145.15	(5.4%)	\$241,643,749	\$255,470,766	(\$13,827,017)
Maternity Delivery Payment	689	\$3,431.83	9	\$3,850.54	698	\$3,437.23	\$3,410.52	0.8%	\$28,790,267	\$28,566,516	\$223,752

Region: East Central  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	3,783	\$377.08	-	\$1,306.69	3,783	\$377.08	\$309.00	22.0%	\$17,117,953	\$14,027,410	\$3,090,542
Preschoolers	12,242	79.77	151	614.29	12,393	86.28	82.37	4.7%	12,831,038	12,249,979	581,059
Children	14,059	84.48	364	332.43	14,423	90.74	85.12	6.6%	15,704,666	14,732,847	971,820
Adolescents	10,117	126.97	252	316.13	10,369	131.56	121.48	8.3%	16,370,121	15,115,996	1,254,125
Adult Males	1,195	287.11	111	445.66	1,306	300.59	312.93	(3.9%)	4,710,832	4,904,286	(193,454)
Adult Females	7,097	273.28	486	554.42	7,583	291.29	282.25	3.2%	26,506,638	25,683,880	822,757
Composite	48,493	\$147.60	1,364	\$448.93	49,857	\$155.85	\$144.94	7.5%	\$93,241,248	\$86,714,399	\$6,526,849
Maternity Delivery Payment	183	\$3,431.51	0	\$3,850.54	183	\$3,431.51	\$3,410.52	0.6%	\$7,535,599	\$7,489,502	\$46,097

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Region: Southwest  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	4,315	\$379.05	-	\$1,306.69	4,315	\$379.05	\$309.00	22.7%	\$19,627,409	\$16,000,073	\$3,627,336
Preschoolers	13,263	84.01	149	614.29	13,412	89.91	82.37	9.1%	14,469,752	13,257,220	1,212,532
Children	14,955	88.98	357	332.43	15,312	94.66	85.12	11.2%	17,392,573	15,640,945	1,751,628
Adolescents	10,517	133.73	270	316.13	10,787	138.29	121.48	13.8%	17,901,275	15,725,359	2,175,916
Adult Males	990	314.42	100	445.66	1,090	326.46	312.93	4.3%	4,270,081	4,093,164	176,917
Adult Females	6,992	299.26	517	554.42	7,509	316.83	282.25	12.3%	28,549,088	25,433,240	3,115,848
Composite	51,032	\$154.62	1,393	\$449.94	52,425	\$162.47	\$143.30	13.4%	\$102,210,177	\$90,150,000	\$12,060,177
Maternity Delivery Payment	204	\$3,466.88	2	\$3,850.54	206	\$3,470.61	\$3,434.52	1.1%	\$8,579,343	\$8,490,133	\$89,210

Region: Southeast  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	3,661	\$386.71	-	\$1,306.69	3,661	\$386.71	\$309.00	25.1%	\$16,988,774	\$13,575,033	\$3,413,741
Preschoolers	10,748	79.96	109	614.29	10,857	85.33	82.37	3.6%	11,116,706	10,731,705	385,000
Children	12,265	84.69	257	332.43	12,522	89.77	85.12	5.5%	13,489,717	12,791,008	698,709
Adolescents	8,727	127.28	190	316.13	8,917	131.30	121.48	8.1%	14,049,850	12,999,261	1,050,589
Adult Males	732	297.64	96	445.66	828	314.80	312.93	0.6%	3,127,856	3,109,302	18,554
Adult Females	5,281	283.29	416	554.42	5,697	303.09	282.25	7.4%	20,720,510	19,295,934	1,424,576
Composite	41,414	\$148.22	1,068	\$454.94	42,482	\$155.94	\$142.22	9.6%	\$79,493,413	\$72,502,244	\$6,991,169
Maternity Delivery Payment	80	\$3,481.37	1	\$3,850.54	81	\$3,485.92	\$3,434.52	1.5%	\$3,388,319	\$3,338,353	\$49,965

Region: Statewide  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	42,029	\$353.63	4	\$1,306.69	42,033	\$353.73	\$316.08	11.9%	\$178,417,487	\$159,429,773	\$18,987,714
Preschoolers	133,082	73.91	1,724	614.29	134,806	80.82	79.02	2.3%	130,747,402	127,826,128	2,921,274
Children	144,252	78.41	3,721	332.43	147,973	84.80	81.66	3.8%	150,568,844	144,997,886	5,570,959
Adolescents	102,072	117.86	2,751	316.13	104,823	123.07	116.71	5.5%	154,802,636	146,800,459	8,002,177
Adult Males	9,042	270.17	700	445.66	9,742	282.78	292.39	(3.3%)	33,058,033	34,181,343	(1,123,310)
Adult Females	74,108	253.63	4,509	554.42	78,617	270.88	261.74	3.5%	255,553,356	246,927,600	8,625,756
Composite	504,585	\$137.30	13,409	\$446.17	517,994	\$145.30	\$138.38	5.0%	\$903,147,759	\$860,163,188	\$42,984,570
Maternity Delivery Payment	1,849	\$3,424.23	22	\$3,850.54	1,871	\$3,429.24	\$3,441.37	(0.4%)	\$76,993,356	\$77,265,639	(\$272,283)

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Old Region: North  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	14,967	\$338.66	1	\$1,306.69	14,968	\$338.72	\$328.88	3.0%	\$60,839,610	\$59,072,320	\$1,767,290
Preschoolers	48,650	70.94	677	614.29	49,327	78.39	73.20	7.1%	46,403,457	43,328,446	3,075,011
Children	52,595	75.03	1,440	332.43	54,035	81.89	75.62	8.3%	53,097,759	49,032,330	4,065,429
Adolescents	36,081	112.75	1,048	316.13	37,129	118.49	107.96	9.8%	52,794,983	48,103,444	4,691,539
Adult Males	3,046	258.41	171	445.66	3,217	268.36	251.95	6.5%	10,359,918	9,726,120	633,798
Adult Females	27,628	246.68	1,626	554.42	29,254	263.79	227.23	16.1%	92,602,193	79,769,735	12,832,459
Composite	182,967	\$131.92	4,963	\$444.26	187,930	\$140.17	\$128.16	9.4%	\$316,097,921	\$289,032,395	\$27,065,526
Maternity Delivery Payment	578	\$3,414.18	10	\$3,850.54	588	\$3,421.60	\$3,441.37	(0.6%)	\$24,142,824	\$24,282,307	(\$139,483)

Old Region: Central  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	19,086	\$353.29	3	\$1,306.69	19,089	\$353.44	\$309.00	14.4%	\$80,961,694	\$70,782,246	\$10,179,448
Preschoolers	60,421	73.02	789	614.29	61,210	79.99	82.37	(2.9%)	58,757,487	60,503,609	(1,746,122)
Children	64,437	77.52	1,667	332.43	66,104	83.94	85.12	(1.4%)	66,588,796	67,524,101	(935,305)
Adolescents	46,747	116.48	1,243	316.13	47,990	121.65	121.48	0.1%	70,056,528	69,960,136	96,392
Adult Males	4,274	263.60	333	445.66	4,607	276.76	312.93	(11.6%)	15,300,178	17,300,188	(2,000,011)
Adult Females	34,207	245.34	1,950	554.42	36,157	262.01	282.25	(7.2%)	113,681,565	122,464,996	(8,783,431)
Composite	229,172	\$135.77	5,985	\$445.32	235,157	\$143.64	\$144.77	(0.8%)	\$405,346,247	\$408,535,277	(\$3,189,030)
Maternity Delivery Payment	987	\$3,416.67	9	\$3,850.54	996	\$3,420.59	\$3,434.52	(0.4%)	\$40,882,871	\$41,049,383	(\$166,512)

Old Region: South  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	7,976	\$382.57	-	\$0.00	7,976	\$382.57	\$309.00	23.8%	\$36,616,183	\$29,575,106	\$7,041,077
Preschoolers	24,011	82.20	258	614.29	24,269	87.86	82.37	6.7%	25,586,457	23,988,925	1,597,533
Children	27,220	87.05	614	332.43	27,834	92.46	85.12	8.6%	30,882,290	28,431,953	2,450,337
Adolescents	19,244	130.80	460	316.13	19,704	135.13	121.48	11.2%	31,951,125	28,724,620	3,226,505
Adult Males	1,722	307.29	196	445.66	1,918	321.43	312.93	2.7%	7,397,937	7,202,466	195,471
Adult Females	12,273	292.39	933	554.42	13,206	310.90	282.25	10.2%	49,269,598	44,729,174	4,540,424
Composite	92,446	\$151.76	2,461	\$405.14	94,907	\$158.33	\$142.82	10.9%	\$180,316,572	\$162,652,244	\$17,664,329
Maternity Delivery Payment	284	\$3,470.96	3	\$3,850.54	287	\$3,474.93	\$3,441.37	1.0%	\$11,967,661	\$11,852,078	\$115,583

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Region: Northwest  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	5,588	\$367.16	-	\$1,373.52	5,588	\$367.16	\$328.88	11.6%	\$24,620,223	\$22,053,456	\$2,566,768
Preschoolers	20,263	71.88	335	653.55	20,598	81.34	73.20	11.1%	20,106,459	18,093,120	2,013,339
Children	22,647	73.97	732	352.82	23,379	82.70	75.62	9.4%	23,202,156	21,214,525	1,987,632
Adolescents	15,543	108.64	530	320.89	16,073	115.64	107.96	7.1%	22,304,462	20,823,794	1,480,668
Adult Males	1,241	277.11	78	451.14	1,319	287.40	251.95	14.1%	4,548,985	3,987,800	561,185
Adult Females	13,537	262.19	888	562.56	14,425	280.68	227.23	23.5%	48,585,760	39,334,054	9,251,706
Composite	78,819	\$136.58	2,563	\$461.18	81,382	\$146.81	\$128.52	14.2%	\$143,368,046	\$125,506,749	\$17,861,297
Maternity Delivery Payment	364	\$3,769.56	7	\$4,231.75	371	\$3,778.28	\$3,441.37	9.8%	\$16,820,893	\$15,320,979	\$1,499,914

Region: North Central  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	4,608	\$360.85	1	\$1,373.52	4,609	\$361.07	\$328.88	9.8%	\$19,970,223	\$18,189,760	\$1,780,463
Preschoolers	13,340	79.06	173	653.55	13,513	86.42	73.20	18.1%	14,013,046	11,869,712	\$2,143,334
Children	13,886	81.36	390	352.82	14,276	88.77	75.62	17.4%	15,208,074	12,954,299	2,253,775
Adolescents	9,678	119.49	284	320.89	9,962	125.23	107.96	16.0%	14,970,733	12,906,529	2,064,204
Adult Males	791	255.98	55	451.14	846	268.67	251.95	6.6%	2,727,562	2,557,755	169,807
Adult Females	6,780	242.20	394	562.56	7,174	259.80	227.23	14.3%	22,365,354	19,562,045	2,803,309
Composite	49,083	\$139.52	1,297	\$454.61	50,380	\$147.64	\$129.09	14.4%	\$89,254,992	\$78,040,100	\$11,214,892
Maternity Delivery Payment	81	\$3,760.62	2	\$4,231.75	83	\$3,771.98	\$3,441.37	9.6%	\$3,756,888	\$3,427,605	\$329,283

Region: Northeast  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	4,771	\$388.76	-	\$1,373.52	4,771	\$388.76	\$328.88	18.2%	\$22,257,243	\$18,829,105	\$3,428,138
Preschoolers	15,047	79.58	169	653.55	15,216	85.96	73.20	17.4%	15,695,503	13,365,614	2,329,889
Children	16,062	81.90	318	352.82	16,380	87.16	75.62	15.3%	17,131,270	14,863,506	2,267,764
Adolescents	10,860	120.28	234	320.89	11,094	124.51	107.96	15.3%	16,575,933	14,373,121	2,202,812
Adult Males	1,014	269.87	38	451.14	1,052	276.42	251.95	9.7%	3,489,512	3,180,565	308,947
Adult Females	7,311	255.34	344	562.56	7,655	269.15	227.23	18.4%	24,723,809	20,873,635	3,850,174
Composite	55,065	\$141.91	1,103	\$460.92	56,168	\$148.18	\$126.83	16.8%	\$99,873,270	\$85,485,546	\$14,387,723
Maternity Delivery Payment	133	\$3,699.50	1	\$4,231.75	134	\$3,703.47	\$3,441.37	7.6%	\$5,955,182	\$5,533,723	\$421,459



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Region: West Central  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	3,144	\$406.67	-	\$1,373.52	3,144	\$406.67	\$309.00	31.6%	\$15,342,933	\$11,657,991	\$3,684,942
Preschoolers	9,990	83.30	110	653.55	10,100	89.51	82.37	8.7%	10,848,684	9,983,441	865,243
Children	10,781	85.72	261	352.82	11,042	92.03	85.12	8.1%	12,194,672	11,279,213	915,459
Adolescents	7,859	125.90	165	320.89	8,024	129.90	121.48	6.9%	12,508,282	11,697,440	810,843
Adult Males	837	304.42	76	451.14	913	316.64	312.93	1.2%	3,469,085	3,428,494	40,591
Adult Females	5,074	288.03	330	562.56	5,404	304.80	282.25	8.0%	19,765,562	18,303,533	1,462,029
Composite	37,685	\$152.33	942	\$463.75	38,627	\$159.93	\$143.14	11.7%	\$74,129,219	\$66,350,112	\$7,779,106
Maternity Delivery Payment	115	\$3,629.09	0	\$4,231.75	115	\$3,629.09	\$3,410.52	6.4%	\$5,008,149	\$4,706,518	\$301,631

Region: Central  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	12,159	\$375.27	3	\$1,373.52	12,162	\$375.51	\$309.00	21.5%	\$54,804,096	\$45,096,845	\$9,707,251
Preschoolers	38,189	74.88	528	653.55	38,717	82.77	82.37	0.5%	38,456,790	38,270,188	186,601
Children	39,597	77.06	1,042	352.82	40,639	84.13	85.12	(1.2%)	41,026,048	41,512,041	(485,992)
Adolescents	28,771	113.17	826	320.89	29,597	118.97	121.48	(2.1%)	42,253,619	43,146,700	(893,082)
Adult Males	2,242	250.43	146	451.14	2,388	262.70	312.93	(16.1%)	7,527,944	8,967,408	(1,439,464)
Adult Females	22,036	236.95	1,134	562.56	23,170	252.88	282.25	(10.4%)	70,311,305	78,477,583	(8,166,278)
Composite	142,994	\$136.46	3,679	\$458.19	146,673	\$144.53	\$145.15	(0.4%)	\$254,379,802	\$255,470,766	(\$1,090,964)
Maternity Delivery Payment	689	\$3,771.59	9	\$4,231.75	698	\$3,777.52	\$3,410.52	10.8%	\$31,640,504	\$28,566,516	\$3,073,988

Region: East Central  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	3,783	\$414.32	-	\$1,373.52	3,783	\$414.32	\$309.00	34.1%	\$18,808,608	\$14,027,410	\$4,781,197
Preschoolers	12,242	85.72	151	653.55	12,393	92.64	82.37	12.5%	13,777,241	12,249,979	1,527,262
Children	14,059	88.21	364	352.82	14,423	94.89	85.12	11.5%	16,423,209	14,732,847	1,690,362
Adolescents	10,117	129.56	252	320.89	10,369	134.21	121.48	10.5%	16,699,082	15,115,996	1,583,086
Adult Males	1,195	299.12	111	451.14	1,306	312.04	312.93	(0.3%)	4,890,264	4,904,286	(14,022)
Adult Females	7,097	283.01	486	562.56	7,583	300.93	282.25	6.6%	27,383,315	25,683,880	1,699,435
Composite	48,493	\$155.36	1,364	\$462.94	49,857	\$163.77	\$144.94	13.0%	\$97,981,719	\$86,714,399	\$11,267,320
Maternity Delivery Payment	183	\$3,771.23	0	\$4,231.75	183	\$3,771.23	\$3,410.52	10.6%	\$8,281,623	\$7,489,502	\$792,121

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Region: Southwest  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	4,315	\$416.49	-	\$1,373.52	4,315	\$416.49	\$309.00	34.8%	\$21,565,910	\$16,000,073	\$5,565,837
Preschoolers	13,263	90.29	149	653.55	13,412	96.55	82.37	17.2%	15,538,489	13,257,220	2,281,269
Children	14,955	92.91	357	352.82	15,312	98.97	85.12	16.3%	18,185,184	15,640,945	2,544,239
Adolescents	10,517	136.46	270	320.89	10,787	141.07	121.48	16.1%	18,261,118	15,725,359	2,535,759
Adult Males	990	327.56	100	451.14	1,090	338.90	312.93	8.3%	4,432,822	4,093,164	339,658
Adult Females	6,992	309.93	517	562.56	7,509	327.32	282.25	16.0%	29,494,216	25,433,240	4,060,976
Composite	51,032	\$162.85	1,393	\$463.70	52,425	\$170.84	\$143.30	19.2%	\$107,477,739	\$90,150,000	\$17,327,739
Maternity Delivery Payment	204	\$3,810.10	2	\$4,231.75	206	\$3,814.20	\$3,434.52	11.1%	\$9,428,698	\$8,490,133	\$938,564

Region: Southeast  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	3,661	\$424.90	-	\$1,373.52	3,661	\$424.90	\$309.00	37.5%	\$18,666,671	\$13,575,033	\$5,091,638
Preschoolers	10,748	85.93	109	653.55	10,857	91.63	82.37	11.2%	11,938,221	10,731,705	1,206,516
Children	12,265	88.43	257	352.82	12,522	93.86	85.12	10.3%	14,103,106	12,791,008	1,312,098
Adolescents	8,727	129.88	190	320.89	8,917	133.95	121.48	10.3%	14,332,718	12,999,261	1,333,457
Adult Males	732	310.08	96	451.14	828	326.44	312.93	4.3%	3,243,474	3,109,302	134,172
Adult Females	5,281	293.39	416	562.56	5,697	313.04	282.25	10.9%	21,400,788	19,295,934	2,104,854
Composite	41,414	\$156.31	1,068	\$468.36	42,482	\$164.16	\$142.22	15.4%	\$83,684,978	\$72,502,244	\$11,182,735
Maternity Delivery Payment	80	\$3,826.02	1	\$4,231.75	81	\$3,831.03	\$3,434.52	11.5%	\$3,723,762	\$3,338,353	\$385,409

Region: Statewide  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	42,029	\$388.56	4	\$1,373.52	42,033	\$388.65	\$316.08	23.0%	\$196,035,882	\$159,429,773	\$36,606,108
Preschoolers	133,082	79.43	1,724	653.55	134,806	86.77	79.02	9.8%	140,371,768	127,826,128	12,545,640
Children	144,252	81.87	3,721	352.82	147,973	88.69	81.66	8.6%	157,480,647	144,997,886	12,482,761
Adolescents	102,072	120.27	2,751	320.89	104,823	125.54	116.71	7.6%	157,913,063	146,800,459	11,112,604
Adult Males	9,042	281.52	700	451.14	9,742	293.71	292.39	0.5%	34,335,757	34,181,343	154,414
Adult Females	74,108	262.66	4,509	562.56	78,617	279.86	261.74	6.9%	264,024,815	246,927,600	17,097,215
Composite	504,585	\$144.67	13,409	\$460.90	517,994	\$152.86	\$138.38	10.5%	\$950,161,931	\$860,163,188	\$89,998,742
Maternity Delivery Payment	1,849	\$3,763.23	22	\$4,231.75	1,871	\$3,768.74	\$3,441.37	9.5%	\$84,615,698	\$77,265,639	\$7,350,059

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Old Region: North  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	14,967	\$372.10	1	\$1,373.52	14,968	\$372.17	\$328.88	13.2%	\$66,847,688	\$59,072,320	\$7,775,368
Preschoolers	48,650	76.23	677	653.55	49,327	84.16	73.20	15.0%	49,815,008	43,328,446	6,486,562
Children	52,595	78.34	1,440	352.82	54,035	85.66	75.62	13.3%	55,541,500	49,032,330	6,509,171
Adolescents	36,081	115.06	1,048	320.89	37,129	120.86	107.96	11.9%	53,851,128	48,103,444	5,747,683
Adult Males	3,046	269.21	171	451.14	3,217	278.88	251.95	10.7%	10,766,058	9,726,120	1,039,938
Adult Females	27,628	255.47	1,626	562.56	29,254	272.54	227.23	19.9%	95,674,924	79,769,735	15,905,189
Composite	182,967	\$138.98	4,963	\$459.41	187,930	\$147.44	\$128.16	15.0%	\$332,496,307	\$289,032,395	\$43,463,912
Maternity Delivery Payment	578	\$3,752.18	10	\$4,231.75	588	\$3,760.34	\$3,441.37	9.3%	\$26,532,963	\$24,282,307	\$2,250,656

Old Region: Central  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	19,086	\$388.18	3	\$1,373.52	19,089	\$388.34	\$309.00	25.7%	\$88,955,637	\$70,782,246	\$18,173,391
Preschoolers	60,421	78.47	789	653.55	61,210	85.88	82.37	4.3%	63,082,715	60,503,609	2,579,106
Children	64,437	80.94	1,667	352.82	66,104	87.80	85.12	3.1%	69,643,930	67,524,101	2,119,829
Adolescents	46,747	118.86	1,243	320.89	47,990	124.09	121.48	2.1%	71,460,983	69,960,136	1,500,847
Adult Males	4,274	274.62	333	451.14	4,607	287.38	312.93	(8.2%)	15,887,292	17,300,188	(1,412,896)
Adult Females	34,207	254.08	1,950	562.56	36,157	270.72	282.25	(4.1%)	117,460,182	122,464,996	(5,004,815)
Composite	229,172	\$143.07	5,985	\$460.15	235,157	\$151.14	\$144.77	4.4%	\$426,490,740	\$408,535,277	\$17,955,463
Maternity Delivery Payment	987	\$3,754.92	9	\$4,231.75	996	\$3,759.23	\$3,434.52	9.5%	\$44,930,275	\$41,049,383	\$3,880,892

Old Region: South  
Package: AB

	Non-MAU		MAU		Composite				CY2007	CY2006	
Population	Enrollment	Cap Rate	Enrollment	Cap Rate	Enrollment	Cap Rate	Current Rate	% Change	Expenditures	Expenditures	Difference
Newborns	7,976	\$420.35	-	\$0.00	7,976	\$420.35	\$309.00	36.0%	\$40,232,581	\$29,575,106	\$10,657,475
Preschoolers	24,011	88.34	258	653.55	24,269	94.35	82.37	14.5%	27,476,710	23,988,925	3,487,785
Children	27,220	90.89	614	352.82	27,834	96.67	85.12	13.6%	32,288,290	28,431,953	3,856,337
Adolescents	19,244	133.47	460	320.89	19,704	137.85	121.48	13.5%	32,593,836	28,724,620	3,869,216
Adult Males	1,722	320.13	196	451.14	1,918	333.52	312.93	6.6%	7,676,296	7,202,466	473,830
Adult Females	12,273	302.81	933	562.56	13,206	321.16	282.25	13.8%	50,895,003	44,729,174	6,165,829
Composite	92,446	\$159.92	2,461	\$423.51	94,907	\$166.76	\$142.82	16.8%	\$189,916,241	\$162,652,244	\$27,263,998
Maternity Delivery Payment	284	\$3,814.59	3	\$4,231.75	287	\$3,818.95	\$3,441.37	11.0%	\$13,152,460	\$11,852,078	\$1,300,382

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Region: Northwest  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	22	\$193.70	\$182.83	5.9%	\$51,138	\$48,267	\$2,871
Preschoolers	608	80.14	75.65	5.9%	584,733	551,955	32,778
Children	821	87.08	70.41	23.7%	857,902	693,653	164,248
Adolescents	<u>585</u>	<u>118.67</u>	<u>97.78</u>	<u>21.4%</u>	<u>833,052</u>	<u>686,394</u>	<u>146,658</u>
<b>Composite</b>	2,036	\$95.24	\$81.05	17.5%	\$2,326,825	\$1,980,270	\$346,555

Region: North Central  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	22	\$193.70	\$182.83	5.9%	\$51,138	\$48,267	\$2,871
Preschoolers	610	87.15	75.65	15.2%	637,926	553,771	84,155
Children	725	94.69	70.41	34.5%	823,794	612,544	211,250
Adolescents	<u>462</u>	<u>129.04</u>	<u>97.78</u>	<u>32.0%</u>	<u>715,393</u>	<u>542,075</u>	<u>173,318</u>
<b>Composite</b>	1,819	\$102.08	\$80.48	26.8%	\$2,228,252	\$1,756,657	\$471,594

Region: Northeast  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	25	\$193.70	\$182.83	5.9%	\$58,111	\$54,849	\$3,263
Preschoolers	682	86.92	75.65	14.9%	711,344	619,134	92,210
Children	850	94.44	70.41	34.1%	963,284	718,155	245,129
Adolescents	<u>584</u>	<u>128.70</u>	<u>97.78</u>	<u>31.6%</u>	<u>901,925</u>	<u>685,221</u>	<u>216,704</u>
<b>Composite</b>	2,141	\$102.55	\$80.86	26.8%	\$2,634,665	\$2,077,359	\$557,306

Region: West Central  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	11	\$193.70	\$170.53	13.6%	\$25,569	\$22,510	\$3,059
Preschoolers	385	90.51	80.12	13.0%	418,145	370,140	48,005
Children	530	98.34	74.62	31.8%	625,435	474,586	150,848
Adolescents	<u>450</u>	<u>134.01</u>	<u>103.49</u>	<u>29.5%</u>	<u>723,670</u>	<u>558,820</u>	<u>164,850</u>
<b>Composite</b>	1,376	\$108.58	\$86.36	25.7%	\$1,792,819	\$1,426,056	\$366,763

Region: Central  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	51	\$193.70	\$170.53	13.6%	\$118,547	\$104,362	\$14,185
Preschoolers	1,517	84.01	80.12	4.9%	1,529,385	1,458,446	70,938
Children	1,813	91.28	74.62	22.3%	1,985,954	1,623,444	362,510
Adolescents	<u>1,171</u>	<u>124.40</u>	<u>103.49</u>	<u>20.2%</u>	<u>1,748,036</u>	<u>1,454,175</u>	<u>293,861</u>
<b>Composite</b>	4,552	\$98.53	\$84.95	16.0%	\$5,381,922	\$4,640,428	\$741,494

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Region: East Central  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	13	\$193.70	\$170.53	13.6%	\$30,218	\$26,602	\$3,616
Preschoolers	441	92.35	80.12	15.3%	488,696	423,978	64,717
Children	627	100.34	74.62	34.5%	754,932	561,445	193,487
Adolescents	<u>387</u>	<u>136.74</u>	<u>103.49</u>	<u>32.1%</u>	<u>634,999</u>	<u>480,586</u>	<u>154,413</u>
<b>Composite</b>	1,468	\$108.36	\$84.73	27.9%	\$1,908,844	\$1,492,611	\$416,233

Region: Southwest  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	24	\$193.70	\$171.58	12.9%	\$55,787	\$49,416	\$6,371
Preschoolers	632	97.74	80.19	21.9%	741,261	608,156	133,106
Children	810	106.20	74.51	42.5%	1,032,238	724,259	307,979
Adolescents	<u>568</u>	<u>144.72</u>	<u>103.40</u>	<u>40.0%</u>	<u>986,427</u>	<u>704,750</u>	<u>281,677</u>
<b>Composite</b>	2,034	\$115.36	\$85.49	34.9%	\$2,815,713	\$2,086,581	\$729,132

Region: Southeast  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	21	\$193.70	\$171.58	12.9%	\$48,814	\$43,239	\$5,574
Preschoolers	459	93.63	80.19	16.8%	515,725	441,683	74,043
Children	646	101.73	74.51	36.5%	788,640	577,619	211,021
Adolescents	<u>452</u>	<u>138.64</u>	<u>103.40</u>	<u>34.1%</u>	<u>751,980</u>	<u>560,822</u>	<u>191,158</u>
<b>Composite</b>	1,578	\$111.17	\$85.73	29.7%	\$2,105,159	\$1,623,363	\$481,795

Region: Statewide  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	189	\$193.70	\$175.27	10.5%	\$439,323	\$397,513	\$41,810
Preschoolers	5,334	87.91	78.54	11.9%	5,627,215	5,027,263	599,952
Children	6,822	95.67	73.12	30.8%	7,832,178	5,985,706	1,846,472
Adolescents	<u>4,659</u>	<u>130.49</u>	<u>101.47</u>	<u>28.6%</u>	<u>7,295,482</u>	<u>5,672,844</u>	<u>1,622,638</u>
<b>Composite</b>	17,004	\$103.87	\$83.72	24.1%	\$21,194,198	\$17,083,325	\$4,110,872

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Old Region: North  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	69	\$193.70	\$182.83	5.9%	\$160,388	\$151,383	\$9,005
Preschoolers	1,900	84.82	75.65	12.1%	1,934,003	1,724,860	209,143
Children	2,396	91.99	70.41	30.7%	2,644,980	2,024,353	620,628
Adolescents	<u>1,631</u>	<u>125.20</u>	<u>97.78</u>	<u>28.0%</u>	<u>2,450,370</u>	<u>1,913,690</u>	<u>536,680</u>
<b>Composite</b>	5,996	\$99.92	\$80.81	23.7%	\$7,189,741	\$5,814,286	\$1,375,455

Old Region: Central  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	75	\$193.70	\$170.53	13.6%	\$174,334	\$153,474	\$20,860
Preschoolers	2,343	86.65	80.12	8.2%	2,436,225	2,252,564	183,661
Children	2,970	94.45	74.62	26.6%	3,366,321	2,659,475	706,846
Adolescents	<u>2,008</u>	<u>128.93</u>	<u>103.49</u>	<u>24.6%</u>	<u>3,106,705</u>	<u>2,493,581</u>	<u>613,124</u>
<b>Composite</b>	7,396	\$102.35	\$85.17	20.2%	\$9,083,585	\$7,559,094	\$1,524,490

Old Region: South  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	45	\$193.70	\$171.58	12.9%	\$104,601	\$92,656	\$11,945
Preschoolers	1,091	96.01	80.19	19.7%	1,256,987	1,049,838	207,148
Children	1,456	104.22	74.51	39.9%	1,820,877	1,301,878	518,999
Adolescents	<u>1,020</u>	<u>142.03</u>	<u>103.40</u>	<u>37.4%</u>	<u>1,738,407</u>	<u>1,265,573</u>	<u>472,834</u>
<b>Composite</b>	3,612	\$113.53	\$85.59	32.6%	\$4,920,872	\$3,709,945	\$1,210,927

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Region: Northwest  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	22	\$203.98	\$182.83	11.6%	\$53,852	\$48,267	\$5,585
Preschoolers	608	85.79	75.65	13.4%	625,945	551,955	73,990
Children	821	97.97	70.41	39.2%	965,237	693,653	271,584
Adolescents	<u>585</u>	<u>128.55</u>	<u>97.78</u>	<u>31.5%</u>	<u>902,421</u>	<u>686,394</u>	<u>216,027</u>
<b>Composite</b>	2,036	\$104.27	\$81.05	28.6%	\$2,547,455	\$1,980,270	\$567,185

Region: North Central  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	22	\$203.98	\$182.83	11.6%	\$53,852	\$48,267	\$5,585
Preschoolers	610	93.29	75.65	23.3%	682,887	553,771	129,116
Children	725	106.54	70.41	51.3%	926,863	612,544	314,318
Adolescents	<u>462</u>	<u>139.78</u>	<u>97.78</u>	<u>43.0%</u>	<u>774,964</u>	<u>542,075</u>	<u>232,889</u>
<b>Composite</b>	1,819	\$111.72	\$80.48	38.8%	\$2,438,566	\$1,756,657	\$681,908

Region: Northeast  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	25	\$203.98	\$182.83	11.6%	\$61,195	\$54,849	\$6,347
Preschoolers	682	93.04	75.65	23.0%	761,480	619,134	142,346
Children	850	106.26	70.41	50.9%	1,083,805	718,155	365,650
Adolescents	<u>584</u>	<u>139.42</u>	<u>97.78</u>	<u>42.6%</u>	<u>977,029</u>	<u>685,221</u>	<u>291,808</u>
<b>Composite</b>	2,141	\$112.23	\$80.86	38.8%	\$2,883,509	\$2,077,359	\$806,150

Region: West Central  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	11	\$203.98	\$170.53	19.6%	\$26,926	\$22,510	\$4,416
Preschoolers	385	96.89	80.12	20.9%	447,616	370,140	77,476
Children	530	110.64	74.62	48.3%	703,685	474,586	229,099
Adolescents	<u>450</u>	<u>145.17</u>	<u>103.49</u>	<u>40.3%</u>	<u>783,931</u>	<u>558,820</u>	<u>225,110</u>
<b>Composite</b>	1,376	\$118.83	\$86.36	37.6%	\$1,962,158	\$1,426,056	\$536,101

Region: Central  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	51	\$203.98	\$170.53	19.6%	\$124,839	\$104,362	\$20,476
Preschoolers	1,517	89.93	80.12	12.3%	1,637,176	1,458,446	178,729
Children	1,813	102.70	74.62	37.6%	2,234,425	1,623,444	610,981
Adolescents	<u>1,171</u>	<u>134.76</u>	<u>103.49</u>	<u>30.2%</u>	<u>1,893,596</u>	<u>1,454,175</u>	<u>439,421</u>
<b>Composite</b>	4,552	\$107.83	\$84.95	26.9%	\$5,890,035	\$4,640,428	\$1,249,608

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Region: East Central  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	13	\$203.98	\$170.53	19.6%	\$31,822	\$26,602	\$5,219
Preschoolers	441	98.85	80.12	23.4%	523,139	423,978	99,161
Children	627	112.89	74.62	51.3%	849,384	561,445	287,939
Adolescents	<u>387</u>	<u>148.12</u>	<u>103.49</u>	<u>43.1%</u>	<u>687,876</u>	<u>480,586</u>	<u>207,290</u>
<b>Composite</b>	1,468	\$118.77	\$84.73	40.2%	\$2,092,220	\$1,492,611	\$599,610

Region: Southwest  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	24	\$203.98	\$171.58	18.9%	\$58,748	\$49,416	\$9,331
Preschoolers	632	104.63	80.19	30.5%	793,506	608,156	185,350
Children	810	119.48	74.51	60.4%	1,161,385	724,259	437,126
Adolescents	<u>568</u>	<u>156.77</u>	<u>103.40</u>	<u>51.6%</u>	<u>1,068,567</u>	<u>704,750</u>	<u>363,817</u>
<b>Composite</b>	2,034	\$126.28	\$85.49	47.7%	\$3,082,206	\$2,086,581	\$995,624

Region: Southeast  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	21	\$203.98	\$171.58	18.9%	\$51,404	\$43,239	\$8,165
Preschoolers	459	100.23	80.19	25.0%	552,074	441,683	110,391
Children	646	114.46	74.51	53.6%	887,309	577,619	309,690
Adolescents	<u>452</u>	<u>150.18</u>	<u>103.40</u>	<u>45.3%</u>	<u>814,598</u>	<u>560,822</u>	<u>253,776</u>
<b>Composite</b>	1,578	\$121.75	\$85.73	42.0%	\$2,305,385	\$1,623,363	\$682,022

Region: Statewide  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	189	\$203.98	\$175.27	16.4%	\$462,638	\$397,513	\$65,125
Preschoolers	5,334	94.11	78.54	19.8%	6,023,821	5,027,263	996,558
Children	6,822	107.64	73.12	47.2%	8,812,093	5,985,706	2,826,387
Adolescents	<u>4,659</u>	<u>141.36</u>	<u>101.47</u>	<u>39.3%</u>	<u>7,902,982</u>	<u>5,672,844</u>	<u>2,230,138</u>
<b>Composite</b>	17,004	\$113.71	\$83.72	35.8%	\$23,201,533	\$17,083,325	\$6,118,208



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Old Region: North  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	69	\$203.98	\$182.83	11.6%	\$168,899	\$151,383	\$17,516
Preschoolers	1,900	90.80	75.65	20.0%	2,070,312	1,724,860	345,451
Children	2,396	103.50	70.41	47.0%	2,975,904	2,024,353	951,552
Adolescents	<u>1,631</u>	<u>135.62</u>	<u>97.78</u>	<u>38.7%</u>	<u>2,654,414</u>	<u>1,913,690</u>	<u>740,724</u>
<b>Composite</b>	5,996	\$109.37	\$80.81	35.3%	\$7,869,529	\$5,814,286	\$2,055,243

Old Region: Central  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	75	\$203.98	\$170.53	19.6%	\$183,586	\$153,474	\$30,112
Preschoolers	2,343	92.76	80.12	15.8%	2,607,930	2,252,564	355,366
Children	2,970	106.27	74.62	42.4%	3,787,495	2,659,475	1,128,019
Adolescents	<u>2,008</u>	<u>139.67</u>	<u>103.49</u>	<u>35.0%</u>	<u>3,365,402</u>	<u>2,493,581</u>	<u>871,821</u>
<b>Composite</b>	7,396	\$112.05	\$85.17	31.6%	\$9,944,413	\$7,559,094	\$2,385,319

Old Region: South  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	45	\$203.98	\$171.58	18.9%	\$110,152	\$92,656	\$17,496
Preschoolers	1,091	102.78	80.19	28.2%	1,345,579	1,049,838	295,741
Children	1,456	117.26	74.51	57.4%	2,048,694	1,301,878	746,816
Adolescents	<u>1,020</u>	<u>153.85</u>	<u>103.40</u>	<u>48.8%</u>	<u>1,883,166</u>	<u>1,265,573</u>	<u>617,593</u>
<b>Composite</b>	3,612	\$124.30	\$85.59	45.2%	\$5,387,591	\$3,709,945	\$1,677,646

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Region: Northwest  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	22	\$193.70	\$182.83	5.9%	\$51,138	\$48,267	\$2,871
Preschoolers	608	79.04	75.65	4.5%	576,671	551,955	24,715
Children	821	80.48	70.41	14.3%	792,878	693,653	99,225
Adolescents	<u>585</u>	<u>111.24</u>	<u>97.78</u>	<u>13.8%</u>	<u>780,871</u>	<u>686,394</u>	<u>94,476</u>
<b>Composite</b>	2,036	\$90.11	\$81.05	11.2%	\$2,201,558	\$1,980,270	\$221,288

Region: North Central  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	22	\$193.70	\$182.83	5.9%	\$51,138	\$48,267	\$2,871
Preschoolers	610	85.95	75.65	13.6%	629,130	553,771	75,359
Children	725	87.51	70.41	24.3%	761,356	612,544	148,812
Adolescents	<u>462</u>	<u>120.96</u>	<u>97.78</u>	<u>23.7%</u>	<u>670,582</u>	<u>542,075</u>	<u>128,506</u>
<b>Composite</b>	1,819	\$96.77	\$80.48	20.2%	\$2,112,206	\$1,756,657	\$355,549

Region: Northeast  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	25	\$193.70	\$182.83	5.9%	\$58,111	\$54,849	\$3,263
Preschoolers	682	85.72	75.65	13.3%	701,536	619,134	82,402
Children	850	87.28	70.41	24.0%	890,274	718,155	172,119
Adolescents	<u>584</u>	<u>120.64</u>	<u>97.78</u>	<u>23.4%</u>	<u>845,429</u>	<u>685,221</u>	<u>160,209</u>
<b>Composite</b>	2,141	\$97.13	\$80.86	20.1%	\$2,495,351	\$2,077,359	\$417,992

Region: West Central  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	11	\$193.70	\$170.53	13.6%	\$25,569	\$22,510	\$3,059
Preschoolers	385	89.26	80.12	11.4%	412,379	370,140	42,240
Children	530	90.89	74.62	21.8%	578,031	474,586	103,444
Adolescents	<u>450</u>	<u>125.62</u>	<u>103.49</u>	<u>21.4%</u>	<u>678,340</u>	<u>558,820</u>	<u>119,520</u>
<b>Composite</b>	1,376	\$102.61	\$86.36	18.8%	\$1,694,319	\$1,426,056	\$268,263

Region: Central  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	51	\$193.70	\$170.53	13.6%	\$118,547	\$104,362	\$14,185
Preschoolers	1,517	82.86	80.12	3.4%	1,508,298	1,458,446	49,851
Children	1,813	84.36	74.62	13.1%	1,835,432	1,623,444	211,988
Adolescents	<u>1,171</u>	<u>116.61</u>	<u>103.49</u>	<u>12.7%</u>	<u>1,638,541</u>	<u>1,454,175</u>	<u>184,366</u>
<b>Composite</b>	4,552	\$93.38	\$84.95	9.9%	\$5,100,818	\$4,640,428	\$460,390

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Region: East Central  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	13	\$193.70	\$170.53	13.6%	\$30,218	\$26,602	\$3,616
Preschoolers	441	91.07	80.12	13.7%	481,957	423,978	57,979
Children	627	92.73	74.62	24.3%	697,713	561,445	136,268
Adolescents	<u>387</u>	<u>128.17</u>	<u>103.49</u>	<u>23.9%</u>	<u>595,223</u>	<u>480,586</u>	<u>114,638</u>
<b>Composite</b>	1,468	\$102.47	\$84.73	20.9%	\$1,805,111	\$1,492,611	\$312,501

Region: Southwest  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	24	\$193.70	\$171.58	12.9%	\$55,787	\$49,416	\$6,371
Preschoolers	632	96.39	80.19	20.2%	731,041	608,156	122,885
Children	810	98.15	74.51	31.7%	954,001	724,259	229,742
Adolescents	<u>568</u>	<u>135.66</u>	<u>103.40</u>	<u>31.2%</u>	<u>924,638</u>	<u>704,750</u>	<u>219,888</u>
<b>Composite</b>	2,034	\$109.20	\$85.49	27.7%	\$2,665,467	\$2,086,581	\$578,886

Region: Southeast  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	21	\$193.70	\$171.58	12.9%	\$48,814	\$43,239	\$5,574
Preschoolers	459	92.34	80.19	15.2%	508,615	441,683	66,932
Children	646	94.02	74.51	26.2%	728,866	577,619	151,247
Adolescents	<u>452</u>	<u>129.96</u>	<u>103.40</u>	<u>25.7%</u>	<u>704,877</u>	<u>560,822</u>	<u>144,055</u>
<b>Composite</b>	1,578	\$105.15	\$85.73	22.7%	\$1,991,171	\$1,623,363	\$367,808

Region: Statewide  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	189	\$193.70	\$175.27	10.5%	\$439,323	\$397,513	\$41,810
Preschoolers	5,334	86.70	78.54	10.4%	5,549,490	5,027,263	522,227
Children	6,822	88.42	73.12	20.9%	7,238,443	5,985,706	1,252,737
Adolescents	<u>4,659</u>	<u>122.32</u>	<u>101.47</u>	<u>20.6%</u>	<u>6,838,806</u>	<u>5,672,844</u>	<u>1,165,962</u>
<b>Composite</b>	17,004	\$98.34	\$83.72	17.5%	\$20,066,061	\$17,083,325	\$2,982,735

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Old Region: North  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	69	\$193.70	\$182.83	5.9%	\$160,388	\$151,383	\$9,005
Preschoolers	1,900	83.66	75.65	10.6%	1,907,337	1,724,860	182,477
Children	2,396	85.02	70.41	20.8%	2,444,508	2,024,353	420,155
Adolescents	<u>1,631</u>	<u>117.36</u>	<u>97.78</u>	<u>20.0%</u>	<u>2,296,882</u>	<u>1,913,690</u>	<u>383,191</u>
<b>Composite</b>	5,996	\$94.63	\$80.81	17.1%	\$6,809,114	\$5,814,286	\$994,828

Old Region: Central  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	75	\$193.70	\$170.53	13.6%	\$174,334	\$153,474	\$20,860
Preschoolers	2,343	85.45	80.12	6.7%	2,402,634	2,252,564	150,070
Children	2,970	87.29	74.62	17.0%	3,111,176	2,659,475	451,701
Adolescents	<u>2,008</u>	<u>120.85</u>	<u>103.49</u>	<u>16.8%</u>	<u>2,912,104</u>	<u>2,493,581</u>	<u>418,523</u>
<b>Composite</b>	7,396	\$96.90	\$85.17	13.8%	\$8,600,248	\$7,559,094	\$1,041,154

Old Region: South  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	45	\$193.70	\$171.58	12.9%	\$104,601	\$92,656	\$11,945
Preschoolers	1,091	94.69	80.19	18.1%	1,239,656	1,049,838	189,817
Children	1,456	96.32	74.51	29.3%	1,682,867	1,301,878	380,989
Adolescents	<u>1,020</u>	<u>133.13</u>	<u>103.40</u>	<u>28.8%</u>	<u>1,629,515</u>	<u>1,265,573</u>	<u>363,942</u>
<b>Composite</b>	3,612	\$107.43	\$85.59	25.5%	\$4,656,638	\$3,709,945	\$946,693

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Region: Northwest  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	22	\$203.98	\$182.83	11.6%	\$53,852	\$48,267	\$5,585
Preschoolers	608	84.63	75.65	11.9%	617,468	551,955	65,512
Children	821	90.40	70.41	28.4%	890,619	693,653	196,966
Adolescents	<u>585</u>	<u>120.00</u>	<u>97.78</u>	<u>22.7%</u>	<u>842,397</u>	<u>686,394</u>	<u>156,003</u>
<b>Composite</b>	2,036	\$98.41	\$81.05	21.4%	\$2,404,336	\$1,980,270	\$424,066

Region: North Central  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	22	\$203.98	\$182.83	11.6%	\$53,852	\$48,267	\$5,585
Preschoolers	610	92.03	75.65	21.6%	673,639	553,771	119,868
Children	725	98.30	70.41	39.6%	855,211	612,544	242,667
Adolescents	<u>462</u>	<u>130.49</u>	<u>97.78</u>	<u>33.5%</u>	<u>723,418</u>	<u>542,075</u>	<u>181,343</u>
<b>Composite</b>	1,819	\$105.65	\$80.48	31.3%	\$2,306,120	\$1,756,657	\$549,462

Region: Northeast  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	25	\$203.98	\$182.83	11.6%	\$61,195	\$54,849	\$6,347
Preschoolers	682	91.78	75.65	21.3%	751,167	619,134	132,033
Children	850	98.04	70.41	39.2%	1,000,021	718,155	281,866
Adolescents	<u>584</u>	<u>130.14</u>	<u>97.78</u>	<u>33.1%</u>	<u>912,042</u>	<u>685,221</u>	<u>226,822</u>
<b>Composite</b>	2,141	\$106.04	\$80.86	31.1%	\$2,724,426	\$2,077,359	\$647,067

Region: West Central  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	11	\$203.98	\$170.53	19.6%	\$26,926	\$22,510	\$4,416
Preschoolers	385	95.57	80.12	19.3%	441,553	370,140	71,414
Children	530	102.09	74.62	36.8%	649,287	474,586	174,700
Adolescents	<u>450</u>	<u>135.52</u>	<u>103.49</u>	<u>31.0%</u>	<u>731,788</u>	<u>558,820</u>	<u>172,967</u>
<b>Composite</b>	1,376	\$112.01	\$86.36	29.7%	\$1,849,554	\$1,426,056	\$423,498

Region: Central  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	51	\$203.98	\$170.53	19.6%	\$124,839	\$104,362	\$20,476
Preschoolers	1,517	88.72	80.12	10.7%	1,615,003	1,458,446	156,557
Children	1,813	94.76	74.62	27.0%	2,061,692	1,623,444	438,248
Adolescents	<u>1,171</u>	<u>125.79</u>	<u>103.49</u>	<u>21.6%</u>	<u>1,767,644</u>	<u>1,454,175</u>	<u>313,469</u>
<b>Composite</b>	4,552	\$101.95	\$84.95	20.0%	\$5,569,178	\$4,640,428	\$928,751

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Region: East Central  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	13	\$203.98	\$170.53	19.6%	\$31,822	\$26,602	\$5,219
Preschoolers	441	97.52	80.12	21.7%	516,054	423,978	92,076
Children	627	104.16	74.62	39.6%	783,722	561,445	222,278
Adolescents	<u>387</u>	<u>138.27</u>	<u>103.49</u>	<u>33.6%</u>	<u>642,122</u>	<u>480,586</u>	<u>161,537</u>
<b>Composite</b>	1,468	\$112.04	\$84.73	32.2%	\$1,973,720	\$1,492,611	\$481,109

Region: Southwest  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	24	\$203.98	\$171.58	18.9%	\$58,748	\$49,416	\$9,331
Preschoolers	632	103.21	80.19	28.7%	782,759	608,156	174,603
Children	810	110.25	74.51	48.0%	1,071,604	724,259	347,345
Adolescents	<u>568</u>	<u>146.35</u>	<u>103.40</u>	<u>41.5%</u>	<u>997,492</u>	<u>704,750</u>	<u>292,742</u>
<b>Composite</b>	2,034	\$119.25	\$85.49	39.5%	\$2,910,603	\$2,086,581	\$824,021

Region: Southeast  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	21	\$203.98	\$171.58	18.9%	\$51,404	\$43,239	\$8,165
Preschoolers	459	98.87	80.19	23.3%	544,597	441,683	102,914
Children	646	105.61	74.51	41.7%	818,716	577,619	241,097
Adolescents	<u>452</u>	<u>140.19</u>	<u>103.40</u>	<u>35.6%</u>	<u>760,416</u>	<u>560,822</u>	<u>199,593</u>
<b>Composite</b>	1,578	\$114.87	\$85.73	34.0%	\$2,175,132	\$1,623,363	\$551,769

Region: Statewide  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	189	\$203.98	\$175.27	16.4%	\$462,638	\$397,513	\$65,125
Preschoolers	5,334	92.83	78.54	18.2%	5,942,094	5,027,263	914,832
Children	6,822	99.32	73.12	35.8%	8,130,749	5,985,706	2,145,043
Adolescents	<u>4,659</u>	<u>131.96</u>	<u>101.47</u>	<u>30.1%</u>	<u>7,377,670</u>	<u>5,672,844</u>	<u>1,704,826</u>
<b>Composite</b>	17,004	\$107.39	\$83.72	28.3%	\$21,913,151	\$17,083,325	\$4,829,826

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Old Region: North  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	69	\$203.98	\$182.83	11.6%	\$168,899	\$151,383	\$17,516
Preschoolers	1,900	89.57	75.65	18.4%	2,042,273	1,724,860	317,413
Children	2,396	95.50	70.41	35.6%	2,745,851	2,024,353	721,499
Adolescents	<u>1,631</u>	<u>126.60</u>	<u>97.78</u>	<u>29.5%</u>	<u>2,477,857</u>	<u>1,913,690</u>	<u>564,167</u>
<b>Composite</b>	5,996	\$103.33	\$80.81	27.9%	\$7,434,881	\$5,814,286	\$1,620,595

Old Region: Central  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	75	\$203.98	\$170.53	19.6%	\$183,586	\$153,474	\$30,112
Preschoolers	2,343	91.50	80.12	14.2%	2,572,610	2,252,564	320,046
Children	2,970	98.06	74.62	31.4%	3,494,701	2,659,475	835,226
Adolescents	<u>2,008</u>	<u>130.38</u>	<u>103.49</u>	<u>26.0%</u>	<u>3,141,554</u>	<u>2,493,581</u>	<u>647,974</u>
<b>Composite</b>	7,396	\$105.83	\$85.17	24.3%	\$9,392,452	\$7,559,094	\$1,833,358

Old Region: South  
Package: C

<u>Population</u>	<u>Enrollment</u>	<u>Cap Rate</u>	<u>Current Rate</u>	<u>% Change</u>	<u>CY2007 Expenditures</u>	<u>CY2006 Expenditures</u>	<u>Difference</u>
Newborns	45	\$203.98	\$171.58	18.9%	\$110,152	\$92,656	\$17,496
Preschoolers	1,091	101.39	80.19	26.4%	1,327,356	1,049,838	277,517
Children	1,456	108.19	74.51	45.2%	1,890,320	1,301,878	588,442
Adolescents	<u>1,020</u>	<u>143.62</u>	<u>103.40</u>	<u>38.9%</u>	<u>1,757,908</u>	<u>1,265,573</u>	<u>492,335</u>
<b>Composite</b>	3,612	\$117.33	\$85.59	37.1%	\$5,085,735	\$3,709,945	\$1,375,790



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## **ATTACHMENT 6**



**State of Indiana**  
**Office of Medicaid Policy and Planning**  
**Maternity Case Rate**

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<u>Inpatient Hospital DRGs</u>	<u>Description</u>
370	Cesarean Section with CC
371	Cesarean Section without CC
372	Vaginal Delivery with Complicating Diagnoses
373	Vaginal Delivery without Complicating Diagnoses
374	Vaginal Delivery after Sterilization and/or D and C
375	Vaginal Delivery with OR Procedure except Sterilization and/or D and C
650	High Risk Cesarean Section with CC
651	High Risk Cesarean Section without CC
652	High Risk Vaginal Delivery with Sterilization and/or D and C

<u>Physician Delivery Procedure Codes</u>	<u>Description</u>
59400	Routine Obstetric Care Including Antepartum Care, Vaginal Delivery, and Postpartum Care
59409	Vaginal Delivery Only
59410	Vaginal Delivery Including Postpartum Care
59510	Routine Obstetric care including Antepartum Care, Cesarean Delivery, and Postpartum Care
59514	Cesarean Delivery Only
59515	Cesarean Delivery Including Postpartum Care
59612	VBAC-Only
59614	VBAC-Include Postpartum Care
59618	Routine Obstetric care including Antepartum Care, Cesarean Delivery, and Postpartum Care
59620	Attempt VBAC- Cesarean Only
59622	Attempt VBAC - Cesarean + Postpart care
X3006	
X3007	

<u>Physician Non-Delivery Procedure Codes</u>	<u>Description</u>
59320	Cerclage Cervix(obstet) Vaginal
59412	Version External Cephalic
59425	Antepartum Care/4-6 Visits
59426	Antepartum Care/7 & more visits
59430	Postpartum Care only
59610	Routine Obstetric care including Antepartum Care, Vaginal Delivery, and Postpartum Care, after previous Cesarean Delivery
59899	Unlisted Procedure, Maternity Care and Delivery